ACTION: Notice of Emergency Rulemaking

SUBJECT: HCPCS Annual Update (R-42-99E)

PUBLIC PROCEEDINGS: Notice is hereby given that the California Department of Health Services will conduct a public hearing, commencing at 10 a.m. on February 23, 2000, in the Auditorium at 601 North Seventh Street, Sacramento, California, during which time any interested person or such person's duly authorized representative may present statements, arguments or contentions relevant to the action described in this notice. Any written statements, arguments or contentions must be received by the Office of Regulations, Department of Health Services, 714 P Street, Room 1000, P.O. Box 942732, Sacramento, CA 94234-7320, by 5 p.m. on February 23, 2000, which is hereby designated as the close of the written comment period. It is requested but not required that written statements, arguments or contentions sent by mail or hand-delivered be submitted in triplicate.

Comments by FAX (916-657-1459) or email (regulation@dhs.ca.gov) must be received before 5:00 p.m. on the last day of the public comment period. All comments, including email or fax transmissions, should include the author's name and U.S. Postal Service mailing address in order for the Department to provide copies of any notices for proposed changes in the regulation text on which additional comments may be solicited.

CONTACT: Inquiries concerning the action described in this notice may be directed to Sandra Ortega of the Office of Regulations at (916) 657-3174. In any such inquiries, please identify the action by using the Department regulation control number **R-42-99E**.

Persons wishing to use the California Relay Service may do so at no cost. The telephone numbers for accessing this service are: 1-800-735-2929, if you have a TDD; or 1-800-735-2922, if you do not have a TDD.

SPECIAL NOTE: On August 30, 1999, emergency regulations for the HCPCS Annual Update became effective and on September 10, 1999, a notice of rulemaking was published in the California Regulatory Notice Register (Department regulation control number R-3-99E). After careful consideration of the comments received, the Department decided to begin a new rulemaking (see Informative Digest below). Please be advised that any comments submitted for the R-3-99E action are not part of this rulemaking, R-42-99E, and will not be addressed in the Final Statement of Reasons. Any comments regarding this action must be received from the time of the publication of this notice and the end of the 45-day public comment period, February 23, 2000.

INFORMATIVE DIGEST: On September 10, 1999, a notice of emergency rulemaking was published in the California Regulatory Notice Register for Department of Health Services regulatory proposal R-3-99E, HCPCS Annual Update, and a date was established for close of public comments. Due to the receipt of numerous comments on a limited number of items, the Department decided to cancel the public notice period, revise the regulations and begin a new 45-day notice period. This notice is the result of the Department's decision to modify the R-3-99E action by introducing the revised proposal, R-42-99E, as the annual United States Health Care Financing Administration's (HCFA) Common Procedure Coding System (HCPCS) update.

This action readopts regulatory text from the R-3-99E action for Sections 51515(c) and (e) and Section 51519(b) without modification. Section 51521(i) is being readopted to restore language that existed prior to the regulatory changes resulting from the R-3-99E action on August 30, 1999 for wheelchairs, powered pressure-reducing air mattress and oxygen and other respiratory equipment.

Section 10725 of the Welfare and Institutions (W & I) Code authorizes the Department to adopt regulations to implement, interpret, or make specific the law enforced by the Department. Section 14105 of the W&I Code, in part, requires the Department to implement, and annually update, the HCPCS and provides emergency authorization to do so.

HCFA published a notice in the Federal Register, Volume 50, Number 194, Page 40895 (October 7, 1985), requiring State Medicaid agencies with a Medicaid Management Information System (MMIS) to accept and use exclusively the HCFA Common Procedure Coding System (HCPCS) effective October 1, 1986. Pursuant to section 1903(r) of the Social Security Act (42 United States Code section 1396b(r)), failure to comply would result in the loss of MMIS approval and a reduction of federal financial participation (FFP) matching funds from 75 to 50 percent. California completed its conversion to HCPCS on October 1, 1992.

These regulation changes adopt into the Medi-Cal program the 1999 HCPCS codes and descriptors, pursuant to the Transaction Lists provided by HCFA. These codes may represent new services, or amend the descriptors of existing services. In those instances where no current HCPCS code adequately describes an existing Medi-Cal service which the Department wishes to retain, a local HCPCS code was assigned and included in these regulations. Annual revisions to procedure codes and descriptors do not require separate HCFA approval so long as they conform to the current coding structure (pages 15 and 16, "HCFA Common Procedure Coding System Conversion/Implementation Manual and User's Guide", dated 2/15/83).

These changes amend the procedure codes, descriptions and prices for items and

services billed by providers to the Medi-Cal program, and affect California Code of Regulations, Title 22, sections 51515(c) and (e), Orthotics and Prosthetics; 51519(b), Eye Appliances; and 51521(i), Durable Medical Equipment.

AUTHORITY: Sections 10725, 14105 and 14124.5, Welfare and Institutions Code; and Section 87, Chapter 1594, Statutes of 1982.

REFERENCE: Sections 14103.7, 14105 and 14105.3, Welfare and Institutions Code; Statutes of 1984, Chapter 258, Items 4260-106-101 and 890; and Statutes of 1985, Chapter 111, Items 4260-106-001 and 890.

#### FISCAL IMPACT ESTIMATE:

- A. Fiscal Effect on Local Government: None.
- B. Fiscal Effect on State Government: None.
- C. Fiscal Effect on Federal Funding of State Programs: None.
- D. Fiscal Effect on Private Persons or Businesses Directly Affected: None.
- E. Other Nondiscretionary Costs or Savings Imposed on Local Agencies: None.

DETERMINATIONS: The Department has determined that the regulations would not impose a mandate on local agencies or school districts, nor are there any costs for which reimbursement is required by Part 7 (commencing with Section 17500) of Division 4 of the Government Code.

When compared to the reimbursement rates in effect prior to the R-3-99E regulatory action, the Department has determined that the regulations would have a negligible economic impact on businesses, including the ability of California businesses to compete with businesses in other states.

The Department has determined that the regulations would not significantly affect the following:

- (1) The creation or elimination of jobs within the State of California.
- (2) The creation of new businesses or the elimination of existing businesses within the State of California.
- (3) The expansion of businesses currently doing business within the State of California. No reduction to the overall scope of benefits or annual program payments will result from this action.

The Department has determined that the regulations would not affect small business because the changes will not result in any new reporting, compliance or record keeping requirements for participating Medi-Cal providers. Provider participation in the Medi-Cal program is voluntary; there is no statutory mandate to provide services to Medi-Cal beneficiaries. In addition, the Department has determined that the action would not affect small businesses because changes to the regulations will not alter the scope of Medi-Cal program benefits or overall payments to providers.

The Department has determined that the regulations will have no impact on housing costs.

AVAILABILITY OF STATEMENT OF REASONS AND TEXT OF REGULATIONS: The Department has prepared and has available for public review an initial statement of reasons for the emergency regulations, all the information upon which the emergency regulations are based, and the text of the emergency regulations. A copy of the initial statement of reasons and a copy of the text of the emergency regulations are available upon request by writing to the Office of Regulations at the address noted above, which address will also be the location of public records, including reports, documentation, and other material related to the emergency regulations.

AVAILABILITY OF CHANGED OR MODIFIED TEXT: The full text of any regulation which is changed or modified from the express terms of the emergency action will be made available by the Department's Office of Regulations at least 15 days prior to the date on which the Department adopts, amends, or repeals the resulting regulation.

ADDITIONAL STATEMENTS AND COMMENTS: In accordance with Government Code Section 11346.5(a)(12) the Department must determine that no alternative considered by the Department would be more effective in carrying out the purpose for which the action was taken or would be as effective and less burdensome to affected private persons than the emergency action.

REASONABLE ACCOMMODATION: The public hearing facility is wheelchair accessible.

Persons unable to attend the hearing and unable to prepare written testimony may contact the Office of Regulations at the phone, fax, or email address above to make arrangements for transcribing their oral testimony. Such request shall be made no later than 15 days prior to the close of the public comment period.

Sign language interpreting services at the public hearing will be provided upon request. Such request shall be made to the Office of Regulations no later than 15 days prior to the close of the public comment period.

Copies of the regulation package will be made available in Braille upon request. Such request shall be made to the Office of Regulations no later than 21 days prior to the close of the public comment period.

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R-42-99E

Dated: Diana M. Bonta', R.N., Dr.P.H.

Director

#### FINDING OF EMERGENCY

The basis for emergency adoption of these amendments is as follows:

Welfare and Institutions Code, Section 14105, states in relevant part:

"(d) The director shall adopt regulations implementing regulatory changes required to initially implement, and annually update, the United States Health Care Financing Administration's common procedure coding system as emergency regulations in accordance with Chapter 3.5 (commencing with Section 13340) of Part 1 of division 3 of Title 2 of the Government Code. For the purposes of the Administrative Procedures Act, the adoption of the regulations shall be deemed to be an emergency and necessary for the immediate preservation of the public peace, health and safety, or general welfare. These regulations shall become effective immediately upon filing with the Secretary of State."

#### INITIAL STATEMENT OF REASONS

Effective August 30, 1999 the Department of Health Services adopted emergency regulation package R-3-99E (OAL File No. 99-0820-02E) which implemented the 1999 HCPCS Update. These changes amended the procedure codes, descriptions and prices for items and services billed by providers of the Medi-Cal program and affected California Code of Regulations, Title 22, sections 51515(c) and (e), Orthotics and Prosthetics; 51519(b), Eye Appliances; and 51521(i), Durable Medical Equipment. This action readopts regulatory text from the R-3-99E action for Sections 51515(c) and (e) and 51519(b) without modification.

Among the changes made to section 51521(i) were changes to the coding and reimbursement rates for wheelchairs, powered pressurereducing air mattress and oxygen and other respiratory equipment. The Department has received a significant number of communications from providers and recipients of these products and services that the regulations adopted August 30, 1999 will have the impact of seriously impeding the availability of these products and services for Medi-Cal beneficiaries. situation is as providers describe, denying access to these products and services to persons in need would jeopardize their quality of care and personal health and safety. Therefore, the Department has concluded that it is in the public interest to restore language that existed prior to the changes resulting from the R-3-99E action on August 30, 1999 for the coding and reimbursement rates for wheelchairs, powered pressure-reducing air mattress and oxygen and other respiratory equipment.

In order to assure compliance with section 1902(a)(30)(A) of the Social Security Act and to assure the health and safety of Medi-Cal recipients, these emergency regulations revert the coding descriptions and maximum reimbursement amounts for wheelchairs, powered pressure-reducing air mattresses and oxygen and other respiratory equipment to those which existed immediately prior to the adoption of regulatory action R-3-99E.

Post-hearing changes may be proposed to amend the regulatory text for any of the above-referenced sections for which the following statements of necessity are provided, based on public comment or departmental initiative. The emergency regulation changes are necessary to comply with the requirements of section 1903(r) of the Social Security Act (Title 42, United States Code section 1396b(r)) and 42 Code of Federal Regulations, section 433.123. The Health Care Financing Administration (HCFA) issued a notice of this requirement in the Federal Register, Volume 50, Number 194 (October 7, 1985). This notice specified, among other things, the following:

- 1. State Medicaid agencies with a Medicaid Management Information System (MMIS) are to accept and use exclusively the HCFA Common Procedure Coding System (HCPCS) effective October 1, 1986 (page 40895).
- 2. Federal Financial Participation (FFP) matching funds for operating an MMIS will be reduced from 75 to 50 percent, on an incremental basis, if State Medicaid agencies fail to meet MMIS performance standards or system requirements (pages 40895 and 40896).
- 3. HCFA will update the HCPCS annually with the future effective dates to be given at a later time (page 40898).

By letter dated October 14, 1998, HCFA notified all state Medicaid agencies of the 1999 revisions to HCPCS and instructed the agencies to proceed with the annual update. Included with this notification are the HCPCS Transaction Lists for 1999, which identify the coding system changes and form the basis of the amendments proposed herein.

Various methodologies were utilized to compute the proposed Medi-Cal maximum reimbursement rates. The choice of methodology for a specific code is based on such parameters as the type of item or service described by the code, availability and type of product specific cost and/or retail pricing data, and current Medicare payment data. Wholesale pricing data received from manufacturers of durable medical equipment and utilized in the computation of proposed Medi-Cal reimbursement rates is considered confidential and is not available for public review. Information which was extracted from manufacturers catalogs is included in the departmental documentation.

The following provides authority and methodologies for computing reimbursement rate adjustments for the changes described.

# 1. Use of CIGNA Medicare's Reimbursement Schedule:

The proposed reimbursement reductions included in this proposal were made in compliance with the provisions of Section 14105.25, Welfare and Institutions Code, which states that the Medi-Cal program may not pay greater than the Part B Medicare maximum allowable payment amount for the same item or service. CIGNA is contracted by HCFA as the Durable Medical Equipment Regional (DMERC) for California, which is responsible processing Part B Medicare claims for durable medical equipment, orthotic and prosthetic appliances (including vision care products), and medical supplies. In addition, CIGNA responsible for providing suppliers and payors with current Medicare fee schedules (see Departmental Document Item #11).

## 2. Methodologies for Computing Medi-Cal Reimbursement Rates:

The Rate Development Branch (RDB) uses many methodologies for computing Medi-Cal maximum reimbursement rates, based on such parameters as the type of service or item being priced, and the availability and type of pricing data. Examples of RDB's methodologies for durable medical equipment, prosthetics and orthotic appliances, and vision care appliances include, but are not limited to: weighted average Medi-Cal paid-to-billed ratios; weighted average Medi-Cal to Medicare reimbursement rates for a given group of services, items or provider groups; cost-based analyses; current Medicare maximum allowable payment amounts; and specified percentage mark-up over average wholesale costs.

# 3. <u>Documentation of Descriptor Changes not Specified in</u> Transaction Lists:

While the majority of the amendments made to procedure code descriptors are specified on the various 1999 HCPCS Transaction Lists, some revisions are based on other data contained in the 1999 HCPCS file, a printout of which was included as Departmental Documentation Item #10.

## 4. Catalog Information used to Compute Rates for DME items:

The Department utilized the most current manufacturers' wholesale catalogs to compute average wholesale costs for the proposed new oxygen and bathroom equipment codes. This information was supplied to the Department by the manufacturers on a confidential basis; therefore, copies of these catalogs were not included as Department Documentation. The necessary information was extracted from these publications and included on the spreadsheets which

were attached to the proposed regulations as Departmental Documentation Items #15 and 16.

## 5. Justification for the Rate Increase to Vision Code V2624:

It was determined that a portion of the savings anticipated from the reduction to the maximum reimbursement rates for corneal lenses be utilized to increase the reimbursement rate for code V2624 to a level equal to seventy percent of the current Medicare rate, which is the average ratio of Medi-Cal to Medicare rates for all eye appliance codes.

#### DESCRIPTION OF REGULATORY CHANGES

## Section 51515(c) -- Orthotics:

- 1. Add national-level procedure codes L1690, L1847 and L3675, pursuant to page 4 of the Transaction List for HCPCS 1999 Additions. The services described by these codes are currently billable using various procedure codes for unlisted orthotic services. The reimbursement rates for these new codes were computed based on the ratio of Medi-Cal to CIGNA Medicare payment amounts for similar services.
- 2. Amend the descriptor for procedure code L1845 to the conform with HCFA descriptor. This error occurred during the regulatory process for the 1992 HCPCS Conversion (OAL File 93-0122-03C).
- 3. Amend subheading to read 'Orthopedic Shoe Additions', to conform to the changes made to the HCPCS descriptions for codes listed under that subheading.
- 4. Amend the descriptor for procedure code L3649 pursuant to page 2 of the Transaction List for HCPCS 1999 Long Description Changes.
- 5. Amend the title of subsection (4) to conform with current HCFA terminology.
- 6. Amend the descriptor for procedure code L3999. This descriptor was revised to correspond to revisions made by HCFA in 1998 (see Departmental Document Item #8).
- 7. Delete procedure codes L4310 and L4320, pursuant to page 1 of the HCFA Transaction List for 1999 Discontinued codes.

# 51515(e) -- Prosthetics:

- 1. Add national-level procedure codes L5968, L5975, L5988 and L6693, pursuant to page 4 of the Transaction List for HCPCS 1999 Additions. The services described by these codes were previously billable using procedure code L5999, Lower extremity prosthesis, not otherwise classified, or code L7499, Upper extremity orthoses, not otherwise classified. Reimbursement rates for these codes were computed based on the ratio of Medi-Cal to CIGNA Medicare payment amounts for similar services.
- 2. Amend the descriptor for procedure codes L5840, pursuant to page 2 of the Transaction List for HCPCS 1999 Long Description Changes.
- 3. Add procedure codes L8015 and L8035, pursuant to page 4 of the Transaction List for HCPCS 1999 Additions. Procedure code L8015 replaces existing local level HCPCS code X9052, which will be deleted. Because the Medi-Cal reimbursement rate for X9052 is greater than the CIGNA Medicare maximum payment amount established for L8015, the reimbursement rate for L8015 has been set at the Medicare amount to comply with the provisions of Welfare Institutions Code, Section 14105.25. The reimbursement rate for L8035 is based on the ratio of Medi-Cal to CIGNA payment amounts for other breast prostheses.
- 4. Add "\*" prior to procedure code L8039 to indicate that this code may be billed by any provider of service within the scope of his or her practice, to provide uniform billing guidelines for all Breast Prostheses codes.
- 5. Amend subheading to read 'Gradient Compression Stockings' to conform with HCFA's revisions to the descriptors for the procedure codes included under that subheading (See Departmental Document Items #7 and #10).
- 6. Amend the descriptors of codes L8100 through L8180, pursuant to the Transaction List for HCPCS 1999 Admin/Description changes.
- 7. Add procedure code L8239 as a separately payable benefit to allow the Medi-Cal program to accurately compile billing and payment information for unlisted gradient compression stockings.
- 8. Revise the descriptors of procedure codes L8420, L8430, L8435, L8470, L8480 and L8485, pursuant to page 2 of the Transaction List for HCPCS 1999 Long Description Changes.

9. Add "\$" prior to the rates for procedure codes L5400, L5500, L5510, L6570, L6589, L6920, L7170 and L8000 as these are the first rates listed in each subsection.

# Section 51519(b) -- Eye Appliances

- 1. Reduce the maximum reimbursement rate for procedure codes V2500, V2501, V2510, V2511, V2513, V2520, V2521 and V2523 to the 1999 CIGNA Medicare maximum payment amount, in compliance with Welfare and Institutions Code, Section 14105.25.
- 2. Correct typographical errors in the descriptors for codes V2501, V2511, V2623 and V2624.
- 3. Amend descriptor for procedure code V2513 to conform with current HCFA decriptor. This error occurred during the regulatory process for the 1992 HCPCS Conversion (OAL File 93-0122-03C).
- 4. Amend the descriptor for procedure code Z2900 for clarity.
- 5. Reduce the reimbursement rate for procedure code Z2902, replacement hydrophilic contact lens, to equal the rate for code Z2900, replacement PMMA or gas permeable contact lens. This reduction is being made as a related change to maintain the integrity of the reimbursement structure. If this rate is not reduced, the reimbursement for a replacement hydrophilic contact lens will be greater than the proposed rate for the most commonly provided new hydrophilic contact lens (procedure code V2520).
- 6. Increase the reimbursement rate for V2624 to seventy percent of the current CIGNA Medicare rate, which is the average Medi-Cal to Medicare rate for all other eye appliances. A portion of the savings anticipated from the reduction in reimbursement rates for corneal lenses shall be utilized for this rate increase.
- 7. Add code V2627 as a separately payable benefit. Claims for these items are currently billed under code V2629, Prosthetic eye, other type. Reimbursement will be By Report.

# Section 51521(i) -- Durable Medical Equipment:

- 1. The following lists the revisions to this section adopted in R-3-99E which the Department wishes to retain:
  - a. Add local level billing codes X3168, X3170, X3174, X3182, X3184, X3186, X3188, X3190 and X3220 as separately payable benefits. These items were previously billed with code E1399, Miscellaneous durable medical equipment. The methodology used to compute the reimbursement rates for these codes is as follows: the lesser of average wholesale cost plus a 40 percent markup or 80 percent of the average manufacturer's suggested retail price.
  - b. Delete local level procedure code X2920, which duplicates national HCPCS code E0243.
  - c. Remove the rental reimbursement rate for procedure code E0243; this item may no longer be rented due to the potential of disease transmission.
  - d. Revise the description of code X3196 to specify all system components included in the reimbursement rate.
  - e. Add national level HCPCS codes E0460 and E0601 as separately billable procedure codes. Items described by these codes are currently billed with E1399, Miscellaneous durable medical equipment. Reimbursement will be By Report.
- 2. Since the Department decided not to make permanent those modifications for wheelchairs, powered pressure-reducing air mattress and oxygen and other respiratory equipment resulting from the R-3-99E action, language amended as a result of that action affecting this section, is being replaced by language existing prior to the filing of that action. This has the effect of rescinding such text filed on August 30, 1999:
  - a. The following procedure codes and assigned rates are being deleted in this action: E0277, E1031, E1230, X3240-X3260.
  - b. The rates for the following procedure codes are being returned to the rates existing prior to August 30, 1999: E0431, E0434, E0435 and X2976.
  - c. The following procedure codes and the rates assigned prior to August 30, 1999 are being readopted: X2982, X3002, X3004 and E1250.

On September 10, 1999, a notice of emergency rulemaking was published in the California Regulatory Notice Register for Department of Health Services regulatory proposal R-3-99E and a date was established for close of public comments. Due to the receipt of numerous comments on a limited number of items, the Department decided to cancel the public notice period, revise the regulations and begin a new 45-day notice period. This notice is the result of the Department's decision to modify the R-3-99E action and to introduce the new proposal, R-42-99E, as the annual HCPCS update.

This action readopts regulatory text from the R-3-99E action for Sections 51515(c) and (e) and Section 51519(b) without modification. Section 15121(i) is being amended to readopt language that existed prior to the regulatory changes resulting from the R-3-99E action on August 30, 1999 for wheelchairs, powered pressure-reducing air mattress and oxygen and other respiratory equipment.

#### DEPARTMENTAL DOCUMENTATION

The Department relied upon the following specific references in determining that the regulation changes were necessary:

- (1) Section 1903(r) of the Social Security Act (Title
  42,United States Code, Section 1396b(r))
- (2) Federal Register, Volume 50, No. 194, Pages 40895-40898
- (3) Letter from HCFA dated October 14, 1998, notifying Medicaid agencies to begin 1999 annual update
- (4) Page 4 of the Transaction List for HCPCS 1999 Additions
- (5) Page 1 of the Transaction List for 1999 HCPCS Discontinued Codes
- (6) Pages 2 and 3 of the Transaction List for 1999 Long Description Changes
- (7) Page 1 of the Transaction List for Admin/Description Changes
- (8) Page 2 of the Transaction List for HCPCS 1998 Long

## Description Changes

- (9) Pages 1, 3, 15 and 16 of the "HCFA Common Procedure Coding System Conversion/Implementation Manual and User's Guide" (2/15/83)
- (10) Printout of the "HCFA Common Procedure Coding System 1999" file, which lists all HCPCS procedure codes valid for 1999
- (11) Welfare and Institutions Code, Sections 14105 and 14105.25.
- (12) Medicare DMERC Region D 1999 Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) Fee Schedule
- (13) Spreadsheet titled "Rate Calculations for New 1999 Orthotic and Prosthetic HCPCS Codes"
- (14) Relevant pages from the Health Utilization Management Report IV, for the period January through June, 1998
- (15) OIL #164-97, New Billing Codes for Selected Bathroom Equipment DME) Benefits
- (16) Spreadsheet titled "Rate Calculations for New Bathroom Equipment"
- (17) Spreadsheet titled "Vision Care Contact Lenses, Comparison of Medi-Cal to Medicare Reimbursement Rates"
- (18) Section 1902(a)(30)(A) of the Social Security Act

#### STATEMENTS OF DETERMINATIONS

#### Alternatives Considered

The Department has determined that there are no alternatives that would be more effective in carrying out the purpose for which the emergency action was taken or would be as effective and less burdensome to affected private persons than the emergency action.

#### Local Mandate Determination

The Department has determined that the regulations would not impose a mandate on local agencies or school districts, nor are there any costs for which reimbursement is required by Part 7 (commencing with Section 17500) of Division 4 of the Government Code, nor are there other non-discretionary costs imposed.

#### Economic Impact Statement

When compared to the reimbursement rates in effect prior to regulatory action R-3-99E, the Department has determined that the regulations would have a negligible economic impact on businesses, including the ability of California businesses to compete with businesses in other states.

The Department has determined that the regulations would have no impact on the creation, expansion, or elimination of businesses or jobs within the State of California.

No reduction to the overall scope of benefits or annual program payments will result from the proposed action.

## Small Business Impact Statement

Provider participation in the Medi-Cal program is voluntary; there is no statutory mandate to provide services to Medi-Cal beneficiaries. The proposed changes will not result in any new reporting, compliance or record keeping requirements for participating Medi-Cal providers.

In addition, the Department has determined that the proposed action would not adversely affect small businesses because these changes to the regulations will not alter the scope of Medi-Cal program benefits or reduce overall payments to providers.

- (1) Readopt Section 51515(c) without modification to read:
  § 51515. Prosthetic and Orthotic Appliances.
  - (c) Orthosis Maximum Reimbursement Rates.
    - (1) No changes

Procedure Code		<i>Maximum</i> Allowance
(2)	Orthotic DevicesLower Extremity	
	HIP ORTHOSES	
L1600	Frejka abduction with cover \$	74.47
L1610	Frejka cover only	18.63
L1620	Pavlik harness	108.24
L1630	Semi-flexible (Von Rosen type)	77.60
L1640	Static, pelvic band or spreader bar, thigh	
	cuffs	167.12
L1650	Static, adjustable (Ilfled type)	154.60
L1660	Static, plastic	73.10
L1680	Dynamic, pelvic control, adjustable hip	
	motion control, thigh cuffs (Rancho hip	
	action type)	780.18
L1685	Post-operative hip abduction type, custom	
	fabricated	1,033.49
L1686	Post-operative hip abduction type	654.94

<u>L1690</u>	Combination, bilateral, lumbo-sacral, hip,	
	femur orthosis providing adduction and	
	internal rotation control	977.03
X8138	Ponsetta bar	91.72
	LEGG PERTHES ORTHOSES	
L1700	Toronto type	\$ 850.78
L1710	Newington type	1,263.72
L1720	Trilateral (Tachdijan type)	827.65
L1730	Scottish Rite type	820.70
L1750	Legg Perthes sling (Sam Brown type)	66.03
L1755	Patten bottom type	565.86
	KNEE ORTHOSES	
*L1800	Elastic with stays	\$ 44.08
*L1810	Elastic with joints	72.69
L1815	Elastic with condylar pads	48.83
**L1820	Elastic with condylar pads and joints	80.69
X8130	Anterior knee cap, padded	35.46
X8132	Valgus or Varus knee cap, padded	49.34
X8134	Condylar pad	46.56
*L182	5 Elastic knee cap	9.85
*L1830	Immobilizer, canvas longitudinal	76.01

		R-42-99E (11/2/99)
L1832	Adjustable knee joints, positional	
	orthosis, rigid support	384.13
L1834	Without knee joint, rigid, molded to	
	patient model	400.40
L1840	Derotation, medial-lateral, anterior	
	cruciate ligament, custom fabricated to	
	patient model	655.72
L1843	Single upright, thigh and calf, with	
	adjustable flexion and extension joint,	
	medial-lateral and rotation control,	
	custom fitted	259.70
L1844	Single upright, thigh and calf, with	
	adjustable flexion and extension joint,	
	medial-lateral and rotation control,	
	molded to patient model	980.95
L1845	Double upright, thigh and calf, with	
	adjustable flexion and extension joint,	
	medial-lateral and rotation control,	
	molded to patient model custom fitted	349.56
L1846	Double upright, thigh and calf, with	
	adjustable flexion and extension	
	ioint, medial-lateral and rotation	

		R-42-99E (11/2/99)
	control, molded to patient model	644.44
<u>L1847</u>	Double upright with adjustable joint,	
	with inflatable air support chamber(s)	290.60
L1850	Knee brace, Swedish type	174.42
L1855	Molded plastic, thigh and calf sections,	
	with double upright knee joints, molded	
	to patient model	645.31
L1858	Molded plastic, polycentric knee	
	joints, pneumatic knee pads (CTI)	685.04
L1860	Modification of supracondylar	
	prosthetic socket, molded to patient	
	model (SK)	. 518.05
L1870	Double upright, thigh and calf lacers,	
	molded to patient model with knee joints	629.74
L1880	Double upright, non-molded thigh and	
	calf cuffs/lacers with knee joints	369.03
L1885	Single or double upright, thigh and calf,	
	with functional active resistance control	491.67
X8128	Thermoplastic molded foreleg piece (cast)	204.81
X8136	Pre-tibial strap, Velcro closure	54.00
X8140	Knee brace (Iowa or equal) (cast)	835.66
*X8142	Spence or Spenco boots, each	48.87
¢γΩ1 <i>Δ</i> Δ	Liner for Spence boots each	6 97

# R-42-99E (11/2/99)

# ANKLE-FOOT ORTHOSES (AFO)

L1900	Spring wire, dorsiflexion assist calf	
	brand\$	132.35
L1902	Ankle gauntlet	39.55
L1904	Molded ankle gauntlet, molded to patient	
	model	337.31
L1906	Multiligamentus ankle support	104.50
L1910	Posterior, single bar, clasp attachment	
	to shoe counter	147.95
L1920	Single upright with static or adjustable	
	stop (Phelps or Perlstein type)	237.55
L1930	Plastic	132.43
L1940	Molded to patient model, plastic	347.88
L1945	Molded to patient model, plastic, rigid	
	anterior tibial section (floor reaction)	554.40
L1950	Spiral, molded to patient model (IRM	
	type), plastic	437.48
L1960	Posterior solid ankle, molded to patient	
	model, plastic	332.00
L1970	Plastic molded to patient model, with	
	ankle joint	449.28
L1980	Single upright free plantar dorsiflexion,	

		(11/2/99)
	solid stirrup, calf band/cuff (single	
	bar "BK" orthosis)	235.66
L1990	Double upright free plantar dorsiflexion,	
	solid stirrup, calf band/cuff (double	
	bar "BK" orthosis)	274.89
	KNEE-ANKLE-FOOT ORTHOSES (KAFO) COMBINATION	NS
X8104	Bow leg or knock knee; single bar, no	
	knee, no ankle joints, thigh, calf, and	
	ankle cuffs\$	256.93
L2000	Single upright, free knee, free ankle,	
	solid stirrup, thigh and calf bands/cuffs	
	(single bar "AK" orthosis)	875.99
L2010	Single upright, free ankle, solid stirrup,	
	thigh and calf bands/cuffs (single bar	
	"AK" orthosis), without knee joint	765.47
X8110	Arthritic type, double or single bar,	
	free knee, free ankle, molded anterior	
	cuff, padded (cast)	717.66
X8106	Bow leg or knock knee; double bar,	
	molded knee, calf and thigh holding	
	pad (cast)	336.50
L2020	Double upright, free knee, free ankle,	
	solid stirrup, thigh and calf bands/cuffs	

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		R-42-99E (11/2/99)
	(double bar "AK" orthosis)	925.91
L2030	Double upright, free ankle, solid stirrup,	
	thigh and calf bands/cuffs, (double bar	
	"AK" orthosis), without knee joint	753.20
X8102	Double bar upright; no knee joint, no	
	ankle joint, two metal and leather	
	thigh bands, one metal and leather	
	calf band	338.60
L2035	Full plastic, static, prefabricated,	
	(pediatric size)	83.31
L2036	Full plastic, double upright, free knee,	
	molded to patient model	943.12
L2037	Full plastic, single upright, free knee,	
	molded to patient model	943.12
L2038	Full plastic, without knee joint, multi-	
	axis ankle, molded to patient model	
	(Lively orthosis or equal)	811.87
L2039	Full plastic, single upright, poly-axial	
	hinge, medial lateral rotation control,	
	molded to patient model 1	,052.36
	HIP-KNEE-ANKLE-FOOT ORTHOSES COMBINATIONS	
L2040	Bilateral rotation straps, pelvic	
	band/belt\$	68.52

		R-42-99E (11/2/99)
L2050	Bilateral torsion cables, hip joint,	
	pelvic band/belt	249.84
L2060	Bilateral torsion cables, ball bearing	
	hip joint, pelvic band/belt	427.86
L2070	Unilateral rotation straps, pelvic band/	
	belt	61.09
L2080	Unilateral torsion cable, hip joint,	
	pelvic band/belt	173.82
L2090	Unilateral torsion cable, ball bearing	
	hip joint, pelvic band/belt	264.25
	TIBIAL FRACTURE ORTHOSES	
L2102	Plastic type casting material, molded to	
	patient\$	184.66
L2104	Synthetic type casting material, molded	
	to patient	173.60
L2106	Thermoplastic type casting material,	
	molded to patient	162.40
L2108	Molded to patient model	565.16
L2112	Soft	237.44
L2114	Semi-rigid	434.00
L2116	Rigid	477.58
X8100	Fracture brace, Rancho or U. of Miami	
	type molded plastic (cast)	269.22

# FEMORAL FRACTURE ORTHOSES

L2122	Plaster type casting material, molded to	
	patient\$	360.40
L2124	Synthetic type casting material, molded	
	to patient	512.58
L2126	Thermoplastic type casting material,	
	molded to patient	660.98
L2128	Molded to patient model	991.29
L2132	Soft	541.73
L2134	Semi-rigid	644.00
L2136	Rigid	820.93
X8108	Fracture cast brace with quad brim, knee	
	joints, walking boot or heel	410.99
X8112	Fracture brace, molded plastic thigh only,	
	Rancho type (cast)	236.52
	ADDITIONS TO FRACTURE ORTHOSES	
L2180	Plastic shoe insert with ankle joints \$	97.44
L2182	Drop lock knee joint	44.63
L2184	Limited motion knee joint	40.08
L2186	Adjustable motion knee joint, Lerman type	61.32
L2188	Quadrilateral brim	38.99
L2190	Waist belt	44.24
L2192	Hip joint, pelvic band, thigh flange, and	

		(11/2/99)
	pelvic belt	250.24
	ADDITIONSSHOE-ANKLE-SHIN-KNEE	
L2200	Limited ankle motion, each joint	\$ 28.64
L2210	Dorsiflexion assist (plantar flexion	
	resist), each joint	30.80
L2220	Dorsiflexion and plantar flexion assist/	
	resist, each joint	50.55
X8114	Long tongue stirrup with control stops	80.69
L2230	Split flat caliper stirrups and plate	
	attachment	54.08
L2240	Round caliper and plate attachment	50.85
L2250	Foot plate, molded to patient model,	
	stirrup attachment	308.74
L2260	Reinforced solid stirrup (Scott-Craig type)	174.17
L2265	Long tongue stirrup	52.64
L227	0 Varus/valgus correction ("T") strap, padded	d/
	lined or malleolus pad	45.03
L2275	Varus/valgus correction, plastic	
	modification, padded/lined	72.37
X8122	T-strap, standard	29.43
X8124	Scaphoid sling	27.60
X8126	Malleolus pad	27.13
T.2280	Molded inner boot	258 15

		R-42-99 (11/2/99
L2300	Abduction bar (bilateral hip involvement),	
	jointed, adjustable	218.91
L2310	Abduction bar-straight	106.88
L2320	Non-molded lacer	93.10
L2330	Lacer molded to patient model	206.53
L2335	Anterior swing band	147.53
L2340	Pre-tibial shell, molded to patient model	262.19
L2350	Prosthetic type, (BK) socket, molded to	
	patient model, (used for 'PTB' 'AFO'	
	orthoses)	774.19
L2360	Extended steel shank	27.36
L2370	Patten bottom	223.04
L2375	Ankle joint and half solid stirrup	70.18
L2380	Straight knee joint, each joint	82.86
L2385	Straight knee joint, heavy duty, each	76.95
L2390	Offset knee joint, each	62.06
L2395	Offset knee joint, heavy duty, each	85.54
L2397	Suspension sleeve	61.16
	ADDITIONSKNEE JOINTS	
L2405	Drop lock, each\$	37.82
L2415	Cam lock (Swiss, French, Bail types) each	73.41
L2425	Disc or dial lock for adjustable knee	
	flexion, each	70.12

		R-42-99E (11/2/99)
L2430	Ratchet lock for active and progressive	
	knee extension, each joint	46.55
L2435	Polycentric joint, each	99.23
L2492	Lift loop for drop lock ring	57.20
X8116	Knee joints, lift loop for drop lock, each.	26.03
	THIGH-WEIGHT BEARING	
L2500	Gluteal/ischial weight-bearing, ring \$	158.01
L2510	Quadri-lateral brim, molded to patient model	401.20
L2520	Quadri-lateral brim, custom fitted	307.56
L2525	Ischial containment/narrow M-L brim molded	
	to patient model	415.52
L2526	Ischial containment/narrow M-L brim, custom	
	fitted	200.48
L2530	Lacer, non-molded	151.25
L2540	Lacer, molded to patient model	242.50
L2550	High roll cuff	171.62
	ADDITIONSPELVIC CONTROL	
L2570	Hip joint, Clevis type two position joint,	
	each\$	257.60
L2580	Pelvic sling	308.61
L2600	Hip joint, Clevis type, or thrust bearing,	
	free each	122 42

		R-42-99E (11/2/99)
L2610	Hip joint, Clevis or thrust bearing, lock,	
	each	199.96
L2620	Hip joint, heavy duty, each	190.07
L2622	Hip joint, adjustable flexion, each	238.26
L2624	Hip joint, adjustable flexion, extension,	
	abduction control, each	287.71
L2627	Plastic, molded to patient model,	
	reciprocating hip joint and cables	874.72
L2628	Metal frame, reciprocating hip joint and	
	cables	666.32
L2630	Band and belt, unilateral	116.70
L2640	Band and belt, bilateral	165.93
X8118	Hip joints, each	67.89
X8120	Hip joint extension assist, each	50.54
	ADDITIONSTHORACIC CONTROL	
L2650	Gluteal pad, each\$	48.18
L2660	Thoracic band	104.65
L2670	Paraspinal uprights	89.17
L2680	Lateral support uprights	78.31
	ADDITIONSGENERAL	
L2750	Plating, chrome or nickel, per bar \$	31.68
L2755	Carbon graphite lamination	61.87
L2760	Extension, per bar (for lineal adjustment	

		R-42-99E (11/2/99)
	for growth)	37.59
L2770	Any materialper bar or joint	53.64
L2780	Non-corrosive finish, per bar	40.07
L2785	Drop lock retainer, each	11.15
L2795	Knee control, full kneecap	59.71
L2800	Knee control, knee cap, medial or lateral	
	pull	73.36
L2810	Knee control, condylar pad	59.15
L2820	Soft interface for molded plastic, below	
	knee section	75.46
L2830	Soft interface for molded plastic, above	
	knee section	79.37
L2840	Tibial length sock, fracture or equal,	
	each	18.48
L2850	Femoral length sock, fracture or equal,	
	each	24.64
L2860	Concentric adjustable torsion-style	
	mechanism, each	174.53
L2999	Lower extremity orthoses, not otherwise	
	specified	By Report
(3) Foo	t Orthoses.	

# FOOT INSERTS

(Removable, Molded to Patient Model)

		R-42-99E 11/2/99)
L3000	"UCB" type, Berkeley Shell, each	\$ 119.18
L3001	Spenco, each	61.04
L3002	Plastazote or equal, each	74.96
L3003	Silicone gel, each	72.24
L3010	Longitudinal arch support, each	65.74
L3020	Longitudinal/metatarsal support, each	72.38
L3030	Removable, formed to patient foot, each	53.87
	ARCH SUPPORTS	
L3040	Removable, premolded, longitudinal, each	\$ 38.64
L3050	Removable, premolded, metatarsal, each	19.57
L3060	Removable, premolded, longitudinal/	
	metatarsal, each	42.00
L3070	Non-removable, longitudinal, each	14.00
L3080	Non-removable, metatarsal, each	6.64
L3090	Non-removable, longitudinal/metatarsal,	
	each	16.24
L3100	Hallus-Valgus night dynamic splint	16.73
	FOOT ABDUCTION AND ROTATION BARS	
*L3140	Rotation positioning device, including	
	shoe(s)	\$ 56.32
*L3150	Rotation positioning device, without	
	ahoe (a)	52 75

L3160	Adjustable shoe-styled positioning device.	Ву	Report
L3170	Plastic heel stabilizer		49.28
	ORTHOPEDIC FOOTWEAR		
L3201	Oxford shoe with supinator or pronator,		
	infant	\$	40.44
L3202	Oxford shoe with supinator or pronator,		
	child		42.68
L3203	Oxford shoe with supinator or pronator,		
	junior		42.68
L3204	Hightop shoe with supinator or pronator,		
	infant		40.44
L3206	Hightop shoe with supinator or pronator,		
	child		42.68
L3207	Hightop shoe with supinator or pronator,		
	junior		42.68
L3208	Surgical boot, each, infant		19.60
L3209	Surgical boot, each, child		21.84
L3211	Surgical boot, each, junior		23.52
L3212	Benesch boot, pair, infant		36.40
L3213	Benesch boot, pair, child		39.20
L3214	Benesch boot, pair, junior		44.24
L3215	Ladies shoes, oxford		84.24
L3216	Ladies shoes, depth inlay, pair		147.83

		R-42-99E (11/2/99)
L3217	Ladies shoes, hightop, depth inlay	117.60
L3218	Ladies surgical boot, each	61.78
L3219	Mens shoes, oxford	106.70
L3221	Mens shoes, depth inlay, pair	147.83
L3222	Mens shoes, hightop, depth inlay	117.60
L3223	Mens surgical boot, each	61.78
L3230	Custom shoes, depth inlay, pair	342.04
L3250	Custom molded shoe, removable inner mold,	
	prosthetic shoe, each	171.02
L3251	Silicone shoe, molded to patient model,	
	each	255.36
L3252	Shoe molded to patient model, Plastazote	
	(or similar), custom fabricated, each	157.92
L3253	Molded shoe, Plastazote (or similar)	
	custom fitted, each	50.40
L3254	Non-standard size or width	21.28
L3255	Non-standard size or length	21.28
L3257	Additional charge for split size	39.20
L3260	Ambulatory surgical boot, each	76.53
L3265	Plastazote sandal, each	50.40
X8280	Post-surgical shoe, all types, each	9.27
X8282	Post-surgical shoe with velcro fastener	5.30
X8284	Walking cast shoe or boot, all types, each	7.81

# R-42-99E (11/2/99)

# SHOE MODIFICATIONS

L3300	Lift, heel, tapered to metatarsals, per	
	inch	\$ 41.72
L3310	Lift, heel and sole, Neoprene, per inch	52.99
L3320	Lift, heel and sole, cork, per inch	100.78
L3330	Lift, metal extension (skate)	224.25
L3332	Lift, inside shoe, tapered, up to one-half	
	inch	39.16
L3334	Lift, heel, per inch	4.93
L3340	Heel wedge, SACH	21.36
L3350	Heel wedge	6.57
L3360	Sole wedge, outside sole	7.96
L3370	Sole wedge, between sole	12.53
L3380	Clubfoot wedge	10.33
L3390	Outflare wedge	19.04
L3400	Metatarsal bar wedge, rocker	6.17
L3410	Metatarsal bar wedge, between sole	22.79
L3420	Full sole and heel wedge, between sole	17.36
L3430	Heel, counter, plastic reinforced	20.64
L3440	Heel, counter, leather reinforced	22.78
L3450	Heel, SACH cushion type	62.81
L3455	Heel, new leather, standard	9.25
L3460	Heel, new rubber, standard	4.10

		R-42-99E (11/2/99)
L3465	Heel, Thomas with wedge	15.27
L3470	Heel, Thomas extended to ball	17.80
L3480	Heel, pad and depression for spur	15.66
L3485	Heel, pad, removable for spur	30.24
X8146	Inside heel lift to 3/8 inch, each	25.79
X8148	Buildup, full sole and heel, Neoprene,	
	0" to 5/8"	34.38
X8150	Buildup, full sole and heel, $3/4$ " to 1 ½".	58.35
X8152	Buildup, full sole and heel, 1 5/8" to 2"	54.20
X5154	Fleece lining in shoe, each	21.06
X5156	Latex shield	13.15
	MISCELLANEOUS ORTHOPEDIC SHOE ADDITIONS	
L3500	Insole, leather	\$ 6.16
L3510	Insole, rubber	6.16
L3520	Insole, felt covered with leather	8.40
L3530	Sole, half	22.46
L3540	Sole, full	32.28
L3550	Toe tap, standard, each	10.11
L3560	Toe tap, horseshoe	4.48
L3570	Special extension to instep (leather with	
	eyelets)	156.62
L3580	Convert instep to velcro closure	18.17
T.3590	Convert firm shoe counter to soft counter.	20.64

		R-42-99E (11/2/99)
L3595	March bar	9.60
	TRANSFER OR REPLACEMENT	
L3600	Transfer of caliper plate, existing	\$ 34.09
L3610	Transfer of caliper plate, new	66.61
L3620	Transfer of solid stirrup, existing	27.30
L3630	Transfer of solid stirrup, new	62.31
L3640	Transfer of Dennis Browne splint (Riveton),	
	both shoes	13.82
L3649	Unlisted procedures for oOrthopedic shoes,	
	shoe modifications, addition or and	
	transfers, not otherwise specified B	y Report
(4) Ort	hotic Devices Upper <del>Extremity</del> Limb.	
	SHOULDER ORTHOSES	
L3650	Abduction restrainer	\$ 35.98
L3660	Abduction restrainer, canvas and webbing	66.05
L3670	Acromio/clavicular (canvas and webbing	
	type)	96.14
<u>L3675</u>	Vest type abduction restrainer, canvas	
	webbing type, or equal	87.86
*X8186	Shoulder brace	55.85
**X8188	Shoulder immobilizer	56.67
	ELBOW ORTHOSES	
T <sub>1</sub> 3700	Elastic with stavs	\$ 35.84

		R-42-99E (11/2/99)
L3710	Elastic with metal joints	58.14
L3720	Double upright with forearm/arm cuffs,	
	free motion	519.53
L3730	Double upright with forearm/arm cuffs,	
	extension/flexion assist	560.26
L3740	Double upright with forearm/arm cuffs,	
	adjustable position lock with active	
	control	842.23
	WRIST-HAND-FINGER ORTHOSES	
L3800	Short opponens, no attachments	\$ 101.92
L3805	Long opponens, no attachment	141.35
	WRIST-HAND-FINGERADDITIONS	
L3810	Thumb abduction ("C") bar	\$ 23.02
L3815	Second M.P. abduction assist	23.89
L3820	I.P. extension assist, with M.P.	
	extension stop	47.74
L3825	M.P. extension stop	16.73
L3830	M.P. extension assist	40.24
L3835	M.P. spring extension assist	48.43
L3840	Spring swivel thumb	24.71
L3845	Thumb I.P. Extension assist, with M.P.	
	stop	29.01

		R-42-99E (11/2/99)
L3850	Action wrist, with dorsiflexion assist	42.21
L3855	Adjustable M.P. flexion control	57.91
L3860	Adjustable M.P. flexion control and I.P	94.29
L3890	Concentric adjustable torsion style	
	mechanism, each	206.86
L3900	Dynamic flexor hinge, wrist or finger	
	driven	612.56
L3901	Dynamic flexor hinge, reciprocal wrist	
	extension/flexion, finger flexion/	
	extension, cable driven	815.48
X8158	Flexor hinge splint, wrist driven,	
	adjustable wrist linkage	97.74
	WRIST-HAND-FINGEREXTERNAL POWER	
L3902	Compressed gas\$	1,352.75
L3904	Electric	2,049.88
	OTHER WRIST-HAND-FINGERCUSTOM FITTED	
	(Bunnell Splints Weniger)	
*X8160	Cock-up splint, canvas with Velcro closure.	\$ 58.96
L3906	Wrist gauntlet, molded to patient model	322.60
X8162	Wrist gauntlet, molded leather or plastic	
	(cast)	186.45

L3907 Wrist gauntlet with thumb spica, molded to

		R-42-99E (11/2/99)
	patient model	188.88
X8164	Thermo plastic wrist/hand orthosis (not	
	Bunnell)	233.63
*L3908	Wrist extension control cock-up,	
	non-molded	50.94
L3910	Swanson design	199.69
L3912	Flexion glove with elastic finger control	62.73
L3914	Wrist extension cock-up	50.91
L3916	Wrist extension cock-up, with outrigger	66.60
L3918	Knuckle bender	55.33
L3920	Knuckle bender, with outrigger	66.12
L3922	Knuckle bender, two segment to flex joints.	66.70
L3924	Oppenheimer	66.13
L3926	Thomas suspension	66.12
L3928	Finger extension, with clock spring	34.77
L3930	Finger extension, with wrist support	39.22
L3932	Safety pin, spring wire	29.50
L3934	Safety pin, modified	27.48
L3936	Palmer	48.39
L3938	Dorsal wrist	58.73
L3940	Dorsal wrist, with outrigger attachment	67.90
L3942	Reverse knuckle bender	57.42
T.3944	Reverse knuckle hender with outrigger	67 26

		R-42-99E (11/2/99)
L3946	Composite elastic	68.14
L3948	Finger knuckle bender	29.16
L3950	Combination Oppenheimer, with knuckle	
	bender and two attachments	93.10
L3952	Combination Oppenheimer, with reverse	
	knuckle and two attachments	106.86
L3954	Spreading hand	56.61
	SHOULDER-ELBOW-WRIST-HAND ORTHOSES	
	ABDUCTION POSITIONING - CUSTOM FITTED	
L3956	Addition of joint to upper extremity	
	orthosis, any material; per joint B	y Report
L3960	Airplane design\$	392.52
L3962	Erbs palsy design	396.89
L3963	Molded shoulder, arm, forearm, and wrist,	
	with articulating elbow joint	1,063.83
	MOBILE ARM SUPPORT ATTACHED TO WHEELCHAIR	
L3964	Balanced, adjustable	\$ 331.60
L3965	Balanced, adjustable Rancho type	698.06
L3966	Balanced, reclining	473.41
L3968	Balanced, friction arm support (friction	
	dampening to proximal and distal joints).	496.70
L3969	Yoke-type arm suspension support	467.37
	ADDITIONS TO MOBILE ARM SUPPORTS	

	R-42-99E (11/2/99)
L3970 Elevating proximal arm	\$ 199.69
L3972 Offset or lateral rocker arm with	
elastic balance control	95.21
L3974 Supinator	76.53
FRACTURE ORTHOSES	
L3980 Humeral	\$ 262.84
L3982 Radius/ulnar	317.40
L3984 Wrist	168.89
L3985 Forearm, hand with wrist hinge	336.44
L3986 Combination of humeral, radius/ulnar,	
wrist, (exampleColles fracture)	469.63
L3995 Addition to upper extremity orthosis,	
sock, fracture or equal, each	18.48
L3999 Upper extremitylimb orthosis, not	
otherwise specified By	Report
(5) No changes	
(6) Ancillary Orthotic Services	
L4310 Multi Podus or equal orthotic preparatory	
management system for lower extremities. \$	246.40
L4320 Addition to AFO, Multi Podus (or equal)	
orthotic preparatory management system	
for lower extremities, flexible foot	
positioner with soft interface for AFO,	

## with Velcro closure..... 30.80 L4350 Pneumatic ankle control splint (e.g., Aircast)...... 77.66 L4360 Pneumatic walking splint (e.g., Aircast). 168.00 L4370 Pneumatic full leg splint (e.g., Aircast) 106.40 L4380 Pneumatic knee splint (e.g., Aircast).... 69.99 L4396 Ankle contracture splint..... 99.32 L4398 Foot drop splint, recumbent positioning device..... 45.72 TRUSS \*L8300 Single with standard pad..... \$ 78.08 \*L8310 Double rear fastener, with standard pads.. 123.28 \*X8176 Double front fastener, with standard pads. 127.14 \*X8178 Umbilical, with pad..... 85.22 \*X8180 Hernia supports, inguinal, with pad...... 97.17 \*X8182 Hernia support, ventral, with pad...... 101.20 \*X8184 Hernia support, umbilical, with pad...... 90.47 \*L8320 Water pad..... 26.96 \*L8330 Scrotal pad..... 26.07

(2) Readopt Section 51515(e) without modification to read:			
(e)	Prosthetic Maximum Reimbursement Rates.		
(1)	Lower Limb Prostheses.		
Procedur Code	re	Maximum Allowance	
	PARTIAL FOOT		
L5000	Shoe insert with longitudinal arch, toe		
	filler	\$ 195.45	
L5010	Molded socket, ankle height, with toe filler.	558.45	
L5020	Molded socket, tibial tubercle height, with		
	toe filler	1,236.57	
	ANKLE		
L5050	Symes, molded socket, Solid Ankle Cushion		
	Heel (SACH) foot	\$ 995.80	
L5060	Symes, metal frame, molded leather socket,		
	articulated ankle/foot	1,616.81	
BELOW KNEE			
X8814	Bock	\$1,358.40	
X8816	Hosmer	1,166.11	
X8818	United States Manufacturing Company		

		R-42-99E (11/2/99)
	(U.S.M.C.)	1,166.11
L5100	Molded socket, shin, SACH foot	1,022.36
L5105	Plastic socket, joints and thigh lacer, SACH	
	foot	1,664.94
	KNEE DISARTICULATION	
L5150	Molded socket, external knee joints,	
	shin, SACH foot	\$ 1,428.59
L5160	Molded socket, bent knee configuration,	
	external knee joints, shin, SACH foot	1,368.19
	ABOVE KNEE	
X8820	Bock	\$ 1,838.64
X8822	Hosmer	1,744.49
X8824	U.S.M.C	1,696.60
L5200	Molded socket, single axis constant friction	
	knee, shin, SACH foot	1,405.01
L5210	Short prosthesis, no knee joint ("Stubbies"),	
	with foot blocks, no ankle joints, each	1,587.11
L5220	Short prosthesis, no knee joint ("Stubbies"),	
	with articulated ankle/foot, dynamically	
	aligned, each	1,904.69
L5230	Constant friction knee, shin, SACH foot	2,411.38
	HIP DISARTICULATION	
L5250	Canadian type; molded socket, hip joint,	

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molded socket, endoskeletal system, hip

	joint, single axis knee, SACH foot,	
	including soft cover and finishing	4,218.71
L5340	Hemipelvectomy, Canadian type; molded	
	socket, endoskeletal system, hip joint,	
	single axis, SACH foot, including	
	soft cover and finishing	4,891.58
	IMMEDIATE AND EARLY POSTSURGICAL PROCEDURES	
L5400	Application of initial rigid dressing,	
	including fitting, alignment, suspension,	
	and one cast change, below knee	<u>\$</u> 668.05
L5410	Application of initial rigid dressing,	
	including fitting, alignment and	
	suspension, below knee, each additional	
	cast change and realignment	202.18
L5420	Application of initial rigid dressing,	
	including fitting, alignment and suspension	
	and one cast change "AK" or knee	
	disarticulation	753.10
L5430	Application of initial rigid dressing, incl.	
	fitting, alignment and suspension, "AK" or	
	knee disarticulation, each additional cast	
	change and realignment	. 208.92
T <sub>1</sub> 5450	Application of non-weight bearing rigid	

	(11/	2/99)
	dressing, below knee	132.66
L5460	Application of non-weight bearing rigid	
	dressing, above knee	164.63
	INITIAL PROSTHESIS	
L5500	Below knee "PTB" type socket, non-alignable	
	system, pylon, no cover, SACH foot, plaster	
	socket, direct formed\$	580.66
L5505	Above kneeknee disarticulation, ischial	
	level socket, non-alignable system, pylon,	
	no cover, SACH foot, plaster socket,	
	direct formed	701.90
	PREPARATORY PROSTHESISBELOW KNEE	
L5510	"PTB" type socket, non-alignable system, pylon,	
	no cover, SACH foot, plaster socket, molded	
	to model	785.76
L5520	"PTB" type socket, non-alignable system, pylon,	
	no cover, SACH foot, thermoplastic or equal,	
	direct formed	829.01
L5530	"PTB" type socket, non-alignable system, pylon,	
	no cover, SACH foot, thermoplastic or equal,	
	molded to model 1	,105.22
L5535	"PTB" type socket, non-alignable system, no	
	cover, SACH foot, prefabricated, adjustable	

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non-alignable system, pylon, no cover, SACH

		R-42-99E (11/2/99)
	foot, laminated socket, molded to model	1,492.80
L5595	Hip disarticulation-hemipelvectomy, pylon,	
	no cover, SACH foot, thermoplastic or	
	equal, molded to patient model	3,219.48
L5600	Hip disarticulation-hemipelvectomy, pylon,	
	no cover, SACH foot, laminated socket,	
	molded to patient model	3,430.00
	ADDITIONSENDOSKELETAL SYSTEMABOVE KNEE	
L5610	Hydracadence system	3 1,701.25
L5613	Knee disarticulation, 4-bar linkage,	
	with hydraulic swing phase control	862.40
L5614	Knee disarticulation, 4-bar linkage, with	
	pneumatic swing phase control	1,990.45
L5616	Universal multiplex system, friction	
	swing phase control	631.81
L5617	Quick change self-aligning unit,	
	above knee or below knee, each	244.46
	ADDITIONSTEST SOCKETS	
L5618	Symes	\$ 108.27
L5620	Below knee	108.27
L5622	Knee disarticulation	149.81
L5624	Above knee	149.81
L5626	Hip disarticulation	174.10

		R-42-99E (11/2/99)
L5628	Hemipelvectomy	174.10
X8840	Prosthetic socket quadrilateral,	
	adjustable	211.01
L5629	Below knee, acrylic socket	98.56
	ADDITIONSSOCKET VARIATIONS	
L5630	Symes type, expandable wall socket	\$ 170.79
L563	1 Above knee or knee disarticulation, acrylic	!
	socket	192.50
L5632	Symes type, "PTB" brim design socket	80.69
L5634	Symes type, posterior, opening (Canadian)	
	socket	227.81
L5636	Symes type, medial opening socket	113.17
L5637	Below knee, total contact	266.36
L5638	Below knee, leather socket	327.50
L5639	Below knee, wood socket	1,037.83
L5640	Knee disarticulation, leather socket	134.48
L5642	Above knee, leather socket	134.48
L5643	Hip disarticulation, flexible inner socket,	
	external frame	690.03
L5644	Above knee, wood socket	134.48
L5645	Below knee, flexible inner socket, external	
	frame	427.29

		R-42-99E (11/2/99)
L5646	Below knee, air cushion socket	207.11
L5647	Below knee suction socket	539.64
L5648	Above knee, air cushion socket	220.79
L5649	Ischial containment/narrow M-L socket	829.38
L5650	Total contact, above knee or knee	
	disarticulation socket	203.88
L5651	Above knee, flexible inner socket, external	
	frame	470.98
L5652	Suction suspension, above knee or knee	
	disarticulation socket	81.20
L5653	Knee disarticulation, expandable wall	
	socket	402.64
	ADDITIONSSOCKET INSERTS	
L5654	Symes (Kemblo, Pelite, Aliplast,	
	Plastazote or equal)	\$ 159.58
L5655	Below knee (Kemblo, Pelite, Aliplast,	
	Plastazote or equal)	129.77
L5656	Knee disarticulation (Kemblo, Pelite,	
	Aliplast, Plastazote or equal)	137.12
L5658	Above knee (Kemblo, Pelite, Aliplast,	
	Plastazote or equal)	137.12
L5660	Symes, silicone gel or equal	216.11

		R-42-99E (11/2/99)
L5661	Multi-durometer Symes	344.89
L5662	Below knee, silicone gel or equal	196.06
L5663	Knee disarticulation, silicone gel or equal.	248.94
L5664	Above knee, silicone gel or equal	248.94
L5665	Multi-durometer, below knee	392.19
	ADDITIONSSUSPENSION-BELOW KNEE	
L5666	Cuff suspension	\$ 45.14
L5667	Socket insert, suction suspension, with	
	locking mechanism	874.63
L5668	Molded distal cushion	58.80
L5669	Socket insert, suction suspension, without	
	locking mechanism	560.57
L5670	Molded supracondylar suspension ("PTS" or	
	similar)	117.05
L5672	Removable medial brim suspension	135.28
L5674	Latex sleeve suspension or equal, each	48.96
L5675	Latex sleeve suspension or equal, heavy	
	duty, each	67.69
L5676	Knee joints, single axis, pair	203.01
L5677	Knee joints, polycentric, pair	369.53
L5678	Joint covers, pair	23.76
L5680	Thigh lacer, non-molded	134.76
L5682	Thigh lacer, gluteal/ischial, molded	248.88

		R-42-99E (11/2/99)
L5684	Fork strap	32.98
L5686	Back check (extension control)	19.85
L5688	Waist belt, webbing	43.44
L5690	Waist belt, padded and lined	75.60
X8826	Soft cosmetic leg cover	160.73
X8828	Realistic leg cover	178.76
X8830	Trouser protector	23.82
	ADDITIONSSUSPENSION-ABOVE KNEE	
L5692	Pelvic control belt, light\$	88.65
L5694	Pelvic control belt, padded and lined	105.52
L5695	Pelvic control, sleeve suspension, Neoprene	
	or equal, each	94.50
L5696	Pelvic joint	105.52
X8832	Pelvic joint cover	17.54
L5697	Pelvic band	46.45
L5698	Silesian bandage	49.14
L5699	Shoulder harness for all lower extremity	
	prostheses	144.67
	ADDITIONS (REPLACEMENTS)FEET-ANKLE UNITS	
L5700	Socket, below knee, molded to patient	
	model \$ 1	,625.05
L5701	Socket, above kneeknee disarticulation,	
	including attachment plate, molded to	

		R-42-99E (11/2/99)
	patient model	2,017.64
L5702	Socket, hip disarticulation, including	
	hip joint, molded to patient model	2,578.12
L5704	Custom-shaped protective cover, below	
	knee	271.40
L5705	Custom-shaped protective cover, above	
	knee	445.55
L5706	Custom-shaped protective cover, knee	
	disarticulation	441.59
L5707	Custom shaped protective cover, hip	
	disarticulation	627.74
	EXOSKELETAL ADDITIONSKNEE-SHIN SYSTEM	I
L5710	Single axis, manual lock	\$ 221.64
L5711	Single axis, manual lock, ultra-light	
	material	359.38
L5712	Single axis, friction swing and stance	
	phase control (safety knee)	289.00
L5714	Single axis, variable friction swing	
	phase control	170.66
L5716	Polycentric, mechanical stance phase	
	lock	520.11
L5718	Polycentric, friction swing and stance	

		R-42-99E (11/2/99)
	phase control	560.56
L5722	Single axis, pneumatic swing, friction	
	stance phase control	753.27
L5724	Single axis, fluid swing phase control	726.20
L5726	Single axis, external joints fluid	
	swing phase control	1,369.22
L5728	Single axis, fluid swing and stance	
	phase control	1,125.26
L5780	Single axis, pneumatic/hydra pneumatic	
	swing phase control	345.48
X8834	Hydra-plex hydraulic knee	547.33
X8836	Hydra-pneumatic with lock	374.18
X8838	Pneumatic knee	478.83
L5785	Below knee, ultra-light material	
	(titanium, carbon fiber or equal)	317.63
L5790	Above knee, ultra-light material	
	(titanium, carbon fiber or equal)	417.97
L5795	Hip disarticulation, ultra-light	
	material (titanium, carbon fiber or	
	equal)	534.19
	ENDOSKELETAL ADDITIONSKNEE-SHIN SYSTEM	
L5810	Single axis, manual lock\$	348.51
L5811	Single axis, manual lock, ultra-light	

		R-42-99E (11/2/99)
	material	632.96
L5812	Single axis, friction swing and stance	
	phase control (safety knee)	393.19
L5814	Polycentric, hydraulic swing phase control	,
	mechanical stance phase lock	1,622.66
L5816	Polycentric, mechanical stance phase	
	lock	689.08
L5818	Polycentric, friction swing, and stance	
	phase control	728.70
L5822	Single axis, pneumatic swing, friction	
	stance phase control	683.69
L5824	Single axis, fluid swing phase control	1,243.27
L5826	Single axis, hydraulic swing phase	
	control, with miniature high activity	
	frame	1,398.96
L5828	Single axis, fluid swing and stance	
	phase control	1,687.63
L5830	Single axis, pneumatic/swing phase	
	control	1,646.40
L5840	4-bar linkage or Mmultiaxial, pneumatic	
	swing phase control	1,343.30
L5845	Stance flexion feature, adjustable	1,306.38

L5964 Above knee, flexible protective outer

		R-42-99E (11/2/99)
	surface covering system	502.11
L5966	Hip disarticulation, flexible outer	
	surface covering system	650.97
	MISCELLANEOUS	
<u> L5968</u>	All lower extremity prostheses, ankle,	
	multiaxial shock absorbing system \$ 1	,623.84
L5970	All lower extremity prostheses, foot,	
	external keel, SACH foot \$	76.53
L5972	All lower extremity prostheses, flexible	
	keel foot (Safe, Sten, Bock Dynamic or	
	equal)	209.13
L5974	All lower extremity prostheses, foot,	
	single axis ankle/foot	143.80
<u> L5975</u>	All lower extremity prostheses,	
	combination single axis ankle and	
	flexible keel foot	207.16
L5976	All lower extremity prostheses, energy	
	storing foot (Seattle Carbon Copy II	
	or equal)	332.32
L5978	All lower extremity prostheses, foot,	
	multiaxial ankle/foot	178.44
L5979	All lower extremity prostheses, multiaxial	
	ankle/foot. dynamic response	1.341.49

		R-42-99E (11/2/99)
L5980	All lower extremity prostheses, flex foot	
	system	1,878.25
L5981	All lower extremity prostheses, flex-walk	
	system or equal	1,457.82
L5982	All exoskeletal lower extremity prostheses,	
	axial rotation unit	384.33
L5984	All endoskeletal lower extremity prostheses,	
	axial rotation unit	338.05
L5985	All endoskeletal lower extremity prostheses,	
	dynamic prosthetic pylon	123.37
L5986	All lower extremity protheses, multi-axial	
	rotation unit ("MCP" or equal)	376.03
L5987	All lower extremity prostheses, shank foot	
	system with vertical loading pylon	3,143.06
<u>L5988</u>	All lower extremity prostheses, combination	
	vertical shock and multiaxial rotation/	
	tortional force reducing pylon	892.69
L5999	Lower extremity prosthesis, not otherwise	
	specified E	By Report
(2)	Upper Limb Prostheses.	
	PARTIAL HAND	
L6000	Robin-Aids, thumb remaining (or equal) \$	856.69
L6010	Robin-Aids, little and/or ring finger	

		R-42-99E (11/2/99)
	remaining (or equal)	950.10
L6020	Robin-Aids, no finger remaining (or	
	equal)	920.07
	WRIST DISARTICULATION	
L6050	Molded socket, flexible elbow hinges,	
	triceps pad	\$ 805.99
L6055	Molded socket with expandable interface,	
	flexible elbow hinges, triceps pad	1,488.03
	ELBOW	
L6100	Below elbow, molded socket, flexible	
	elbow hinge, triceps pad	\$ 815.10
L6110	Below elbow, molded socket, (Muenster	
	or Northwestern suspension types)	853.14
L6120	Below elbow, molded double wall split	
	socket, step-up hinges, half cuff	987.19
L6130	Below elbow, molded double wall split	
	socket, stump activated locking hinge,	
	half cuff	1,236.13
L6200	Elbow disarticulation, molded socket,	
	outside locking hinge, forearm	1,141.93
L6205	Elbow disarticulation, molded socket with	
	expandable interface, outside locking	
	hinges, forearm	2,060.63

L6250	Above elbow, molded double wall socket,
	internal locking elbow, forearm 1,173.23
	SHOULDER
L6300	Molded socket, shoulder bulkhead,
	humeral section, internal locking
	elbow, forearm \$1,468.22
L6310	Passive restoration (complete
	prosthesis)
L6320	Passive restoration (shoulder cap only) 1,215.57
	INTERSCAPULAR THORACIC
L6350	Molded socket, shoulder bulkhead, humeral
	section, internal locking elbow,
	forearm\$2,362.08
L6360	Passive restoration (complete
	prosthesis)
L6370	Passive restoration (shoulder cap only) 1,332.14
	IMMEDIATE AND EARLY POST SURGICAL PROCEDURES
L6380	Application of initial rigid dressing,
	including fitting alignment and suspension
	of components, and one cast change, wrist
	disarticulation or below elbow \$ 593.60
L6382	Application of initial rigid dressing,
	including fitting alignment and suspen-

		(11/2/99)
	sion of components, and one cast change,	
	elbow disarticulation or above elbow	660.10
L6384	Application of initial rigid dressing	
	including fitting alignment and suspen-	
	sion of components, and one cast change,	
	shoulder disarticulation or interscapular	
	thoracic	1,101.63
L6386	Each additional cast change and	
	realignment	222.95
L6388	Application of rigid dressing only	232.49
	ENDOSKELETALELBOW OR SHOULDER AREA	
L6400	Below elbow, molded socket, endoskeletal	
	system, including soft prosthetic tissue	
	shaping	\$1,442.96
L6450	Elbow disarticulation, molded socket,	
	endoskeletal system, including soft	
	prosthetic tissue shaping	2,209.58
L6500	Shoulder disarticulation, molded socket,	
	endoskeletal system, including soft	
	prosthetic tissue shaping	2,062.10
L6550	Shoulder disarticulation, molded socket,	
	endoskeletal system, including soft	
	prosthetic tissue shaping	2,990.12

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## ENDOSKELETAL -- INTERSCAPULAR THORACIC L6570 Molded socket, endoskeletal system, including soft prosthetic tissue shaping.....\$3,336.60 Preparatory, wrist disarticulation or L6580 below elbow, single wall plastic socket, friction wrist, flexible elbow hinges, figure of eight harness, humeral cuff, bowden cable control, USMC or equal pylon, no cover, molded to patient L6582 Preparatory, wrist disarticulation or below elbow, single wall socket, friction wrist, flexible elbow hinges, figure of eight harness, humeral cuff, bowden cable control, USMC or equal pylon, no cover, direct formed...... 649.95 L6584 Preparatory, elbow disarticulation or above elbow, single wall plastic socket, friction wrist, locking elbow, figure of eight harness, fair lead cable control, USMC or equal

pylon, no cover, molded to patient

	model	1,163.31
L6586	Preparatory, elbow disarticulation or	
	above elbow, single wall socket,	
	friction wrist, locking elbow, figure	
	of eight harness, fair lead cable	
	control, USMC or equal pylon, no	
	cover, direct formed	1,016.14
L6588	Preparatory, shoulder disarticulation or	
	interscapular thoracic, single wall	
	plastic socket, shoulder joint,	
	locking elbow, friction wrist, chest	
	strap, fair lead cable control, USMC	
	or equal pylon, no cover, molded to	
	patient model	1,730.58
L6590	Preparatory, shoulder disarticulation or	
	interscapular thoracic, single wall	
	socket, shoulder joint, locking elbow,	
	friction wrist, chest strap, fair lead	
	cable control, USMC or equal pylon, no	
	cover, direct formed	1,514.98
	UPPER EXTREMITY ADDITIONS	
L6589	Fair lead cable control, U.S.M.C. or equal,	
	no cover, molded to patient model	<u>\$</u> 32.03

		R-42-99E (11/2/99)
L6600	Polycentric hinge, pair	<del>\$</del> 67.89
L6605	Single pivot hinge, pair	75.29
L6610	Flexible metal hinge, pair	64.44
X8842	WD-400 quick change wrist	60.53
X8844	WE-500S wrist	45.02
X8846	OW-100N oval friction wrist	47.24
X8848	OW-75N oval friction wrist (child)	47.24
L6615	Disconnect locking wrist unit	71.22
L6616	Additional disconnect insert for locking	
	wrist unit, each	28.00
L6620	Flexion-friction wrist unit	149.29
L6623	Spring assisted rotational wrist unit with	
	latch release	247.89
L6625	Rotation wrist unit with cable lock	272.66
L6628	Upquick disconnect hook adapter, Otto Bock	
	or equal	280.56
L6629	Quick disconnect lamination collar with	
	coupling piece, Otto Bock or equal	79.33
L6630	Stainless steel, any wrist	76.92
L6632	Latex suspension sleeve, each	36.96
L6635	Lift assist for elbow	115.08
L6637	Nudge control elbow lock	203.70
L6640	Shoulder abduction joint, pair	109.69

		R-42-99E (11/2/99)
L6641	Excursion amplifier, pulley type	103.34
L6642	Excursion amplifier, lever type	129.68
L6645	Shoulder flexion-abduction joint, each	149.05
L6650	Shoulder universal joint, each	145.71
L6655	Standard control cable, extra	32.03
L6660	Heavy duty control cable	84.96
L6665	Teflon, or equal, cable lining	21.89
L6670	Hook to hand, cable adapter	26.84
L6672	Harness, chest or shoulder, saddle type	104.77
L6675	Harness, figure of ("8") eight type, for	
	single control	62.51
L6676	Harness, figure of ("8") eight type, for	
	dual control	77.22
L6680	Test socket, wrist disarticulation or below	
	elbow	179.71
L6682	Test socket, elbow disarticulation or above	
	elbow	179.71
L6684	Test socket, shoulder disarticulation or	
	interscapular thoracic	179.71
L6686	Suction socket	364.79
L6687	Frame type socket, below elbow or wrist	
	disarticulation	265.30
L6688	Frame type socket, above elbow or elbow	

		R-42-99E (11/2/99)
	disarticulation	291.55
L6689	Frame type socket, shoulder disarticulation	350.18
L6690	Frame type socket, interscapular-thoracic	380.01
L6691	Removable insert, each	209.13
L6692	Silicone gel insert or equal, each	413.00
<u>L6693</u>	External locking elbow, forearm	
	counterbalance	1,297.85
	TERMINAL DEVICESHOOKS	
L6700	Dorrance, or equal, Model #3	\$ 165.52
L6705	Dorrance, or equal, Model #5	130.52
L6710	Dorrance, or equal, Model #5X	169.02
L6715	Dorrance, or equal, Model #5XA	169.02
L6720	Dorrance, or equal, Model #6	349.04
L6725	Dorrance, or equal, Model #7	196.79
L6730	Dorrance, or equal, Model #7LO	373.57
L6735	Dorrance, or equal, Model #8	171.39
L6740	Dorrance, or equal, Model #8X	169.80
L6745	Dorrance, or equal, Model #88X	194.53
L6750	Dorrance, or equal, Model #10P	169.80
L6755	Dorrance, or equal, Model #10X	169.80
L6765	Dorrance, or equal, Model #12P	169.80
L6770	Dorrance, or equal, Model #99X	169.80
L6775	Dorrance, or equal, Model #555	222.11

		R-42-99E (11/2/99)
L6780	Dorrance, or equal, Model #SS555	169.80
L6790	ACCU hook, or equal	185.09
L6795	Hook2 load, or equal	562.04
L6800	Hook-APRL VC, or equal	446.34
L6805	Modifier wrist flexion unit	157.33
L6806	TRS grip, Grip III, VC, or equal	807.80
L6807	Grip I, Grip II, VC, or equal	583.36
L6808	TRS adept, infant or child, VC, or equal	513.71
L6809	TRS Super Sport, passive	182.88
	TERMINAL DEVICESHAND	
L6810	Pincher tool, Otto Bock or equal\$	96.51
L6825	Dorrance, VO	527.65
L6830	APRL, VC	610.94
L6835	Sierra, VO	557.35
L6840	Becker Imperial	408.60
L6845	Becker Lock Grip	348.25
L6850	Becker Plylite	284.99
X8852	Becker Plylite hand with opening thumb	249.94
L6855	Robin-Aids, VO	424.52
L6860	Robin-Aids, VO Soft	259.49
L6865	Passive hand	172.40
X8854	Passive hand, Otto Bock system	196.80
X8856	Cosmetic hand, wrist disarticulation	

		R-42-99E (11/2/99)
	(flexible socket, passive hand and	
	glove)	681.76
X8858	Cosmetic hand, BE amputation (plastic	
	socket, passive hand and glove, less	
	harness)	679.47
L6867	Detroit infant hand (mechanical)	505.17
L6868	Passive infant hand, (Steeper, Hosmer	
	or Equal)	116.55
L6870	Child mitt	112.24
L6872	NYU child hand	472.59
L6873	Mechanical infant hand, Steeper or equal	177.80
L6875	Bock, VC	371.31
L6880	Bock, VO	290.47
L6890	Glove for above hands, production glove	92.39
L6895	Glove for above hands, custom glove	215.08
X8860	Kingsley cosmetic glove (sized to APRL	
	hand)	83.17
X8862	APRL cuff (as cover for forearm lengthener	
	when changing from APRL hook to APRL	
	hand)	52.17
X8864	Forearm lengthener (aluminum 1/2-20	
	thread)	19.92
X8866	Cosmetic hook fairing	28.42

		R-42-99E (11/2/99)
X8868	Child's mitt glove	76.79
x8870	Custom glove, cosmetic without zipper	214.76
x8872	Myoelectric, below elbow, rotation wrist	
	(Otto Bock or equal) includes MYO	
	testing procedures	5,026.00
	HAND RESTORATION	
	(Casts, shading and measurements included)	
L6900	Partial hand, with glove, thumb or one	
	finger remaining	\$ 654.89
L6905	Partial hand, with glove, multiple	
	fingers remaining	624.89
L6910	Partial hand, with glove, no fingers	
	remaining	648.48
L6915	Replacement glove for above (does not	
	include cast)	417.30
	EXTERNAL POWERBASE DEVICES	
L6920	Wrist disarticulation, self suspended inner	
	socket, removable forearm shell, Otto Bock	
	or equal, switch, cables, two batteries	
	and one charger, switch control of terminal	
	device	<u>\$</u> 3,360.79
T.6925	Wrist disarticulation, self-suspended inner	

	socket, removable forearm shell, Otto Bock	
	or equal electrodes, cables, two	
	batteries and one charger, myoelectronic	
	control of terminal device	3,830.58
L6930	Below elbow, self-suspended inner socket,	
	removable forearm shell, Otto Bock or	
	equal switch, cables, two batteries and	
	one charger, switch control of terminal	
	device	3,675.00
L6935	Below elbow, self-suspended inner socket,	
	removable forearm shell, Otto Bock or	
	equal electrodes, cables, two	
	batteries and one charger, myoelectronic	
	control of terminal device	4,188.31
L6940	Elbow disarticulation, molded inner socket,	
	removable humeral shell, outside locking	
	hinges, forearm, Otto Bock or equal switch,	
	cables, two batteries and one charger,	
	switch control of terminal device	3,950.33
L6945	Elbow disarticulation, molded inner socket,	
	removable humeral shell, outside locking	
	hinges, forearm, Otto Bock or equal	
	electrodes, cables, two batteries and one	

		R-42-99E (11/2/99)
	charger, myoelectronic control of terminal	
	device	4,546.50
L6950	Above elbow, molded inner socket, removable	
	humeral shell, internal locking elbow,	
	forearm, Otto Bock or equal switch, cables,	
	two batteries and one charger, switch	
	control of terminal device	4,404.17
L6955	Above elbow, molded inner socket, removable	
	humeral shell, internal locking elbow,	
	forearm, Otto Bock or equal electrodes,	
	cables, two batteries and one charger,	
	myoelectronic control of terminal device	5,262.83
L6960	Shoulder disarticulation, molded inner	
	socket, removable shoulder shell,	
	shoulder bulkhead, humeral section,	
	mechanical elbow, forearm, Otto Bock	
	or equal switch, cables, two batteries	
	and one charger, switch control of	
	terminal device	5,740.00
L6965	Shoulder disarticulation, molded inner	
	socket, removable shoulder shell,	
	shoulder bulkhead, humeral section,	

	mechanical elbow, forearm, Otto Bock	
	or equal electrodes, cables, two	
	batteries and one charger, switch control	
	of terminal device	6,667.50
L6970	Interscapularthoracic, molded inner	
	socket, removable shoulder shell,	
	shoulder bulkhead, humeral section,	
	mechanical elbow, forearm, Otto Bock	
	or equal switch, cables, two batteries	
	and one charger, switch control of	
	terminal device	7,070.00
L6975	Interscapularthoracic, molded inner	
	socket, removable shoulder shell,	
	shoulder bulkhead, humeral section,	
	mechanical elbow, forearm, Otto Bock	
	or equal electrodes, cables, two	
	batteries and one charger, myoelec-	
	tronic control of terminal device	8,050.00
	EXTERNAL POWERTERMINAL DEVICES	
L7010	Electronic hand, Otto Bock, Steeper or	
	equal, switch controlled	\$1,491.88
L7015	Electronic hand, System Teknik, Variety	
	Village or equal, switch controlled	2,620.33

		R-42-99E (11/2/99)
L7020	Electronic greifer, Otto Bock or equal,	
	switch controlled	1,561.88
L7025	Electronic hand, Otto Bock or equal,	
	myoelectronically controlled	1,461.34
L7030	Electronic hand, System Teknik, Variety	
	Village or equal, myoelectronically	
	controlled	2,639.00
L7035	Electronic greifer, Otto Bock or equal,	
	myoelectronically controlled	1,469.30
L7040	Prehensile actuator, Hosmer or equal,	
	switch controlled	1,281.88
L7045	Electronic hook, child, Michigan or equal,	
	switch controlled	675.62
	ELECTRONIC ELBOWS	
L7170	Hosmer or equal, switch controlled	<u>\$</u> 2,572.50
L7180	Boston, Utah or equal, myoelectronically	
	controlled	16,310.00
L7185	Adolescent, Variety Village or equal,	
	switch controlled	2,695.00
L7186	Child, Variety Village or equal, switch	
	controlled	3,797.50
L7190	Adolescent, Variety Village or equal,	
	myoelectronically controlled	3,543.75

		R-42-99E (11/2/99)
L7191	Child, Variety Village or equal, myo-	
	electronically controlled	4,706.24
	CONTROL MODULES AND BATTERY COMPONENTS	
L7260	Electronic wrist rotator, Otto Bock	
	or equal	\$1,134.00
L7261	Electronic wrist rotator, for Utah arm	2,059.17
L7266	Servo control, Steeper or equal	445.08
L7272	Analogue control, UNB or equal	952.00
L7274	Proportional control, 6-12 volt, Liberty,	
	Utah or equal	. 2,978.06
L7360	Six volt battery, Otto Bock or equal, each	. 111.21
L7362	Battery charger, six volt, Otto Bock or	
	equal	. 116.81
L7364	Twelve volt battery, Utah or equal, each	. 214.03
L7366	Battery charger, twelve volt, Utah or	
	equal	. 280.00
L7499 t	Upper extremity prosthesis, not otherwise	
	specified	. By Report
(3)	Breast Prostheses.	
*L8000	Mastectomy bra	. \$ 30.71
*L8010	Mastectomy sleeve	. 27.93
*L8015	External breast prosthesis garment, with	
	mastectomy form, post mastectomy	. 44.13

			42-99E /2/99)
*L8020	Mastectomy form		91.47
*L8030	Silicone or equal		250.26
*L8035	Custom breast prosthesis, post mastectomy,		
	molded to patient model	2	,196.13
*X8800	Camp all sizes		62.06
*X8808	Airway companion size 1-7		129.76
*X8810	Airway companion size 8-10		145.19
*X8812	Airway companion size 12-16		154.77
*x9050	Adhesive skin support attachment for use with	L	
	external breast prostheses, each		3.00
*X9052	Post mastectomy undergarment comfort form		45.50
<u>*</u> L8039	Breast prosthesis, not otherwise specified	Ву	Report
(4)	General Items.		
	ELASTIC GRADIENT COMPRESSION STOCKINGS		
*L8100	Below knee, medium weight 18-30 mm Hg, each	\$	22.99
*L8110	Below knee, heavy weight 30-40 mm Hg, each		27.89
*L8120	Below knee, <del>surgical weight (Linton type or</del>		
	<del>equal)</del> 40-50 mm Hg, each		28.82
*L8130	Above knee, medium weight Thigh length, 18-30		
	mm Hg, each		26.27
*L8140	Above knee, heavy weight Thigh length, 30-40		
	mm Hg, each		36.10
*T.8150	Above knee, surgical weight, (Linton type or		

		(11/	2/99)
	equal) Thigh length, 40-50 mm Hg, each		44.36
*L8160	Full length/chap style, medium weight		
	<u>18-30 mm Hg</u> , each		39.43
*L8170	Full length/ chap style, heavy weight		
	30-40 mm Hg, each		44.35
*L8180	Full length/chap style, heavy surgical weight		
	(Linton type or equal) 40-50 mm Hg, each		50.92
L8210	Custom made	Ву	Report
L8220	Lymphedema	Ву	Report
*L8230	Garter Belt		11.50
*L8239	Not otherwise specified	Ву	Report
*X9034	Jobst and related burn garment	.Ву	Report
	PROSTHETIC SOCKS		
L8400	Prosthetic sheath, below knee, each	. \$	11.88
L8410	Prosthetic sheath, above knee, each	•	11.88
L8415	Prosthetic sheath, upper limb, each		10.94
L8417	Prosthetic sheath/sock, including a gel cushi	on	
	layer, below knee or above knee, each	•	36.31
*L8420	Prosthetic sock, woolmultiple ply, below kne	e,	
	each		11.79
*L8430	Prosthetic sock, woolmultiple ply, above knee	,	
	each		11.79
L8435	Prosthetic sock, woolmultiple ply, upper limb	,	

		R-42-99E (11/2/99)
	each	. 11.79
*L8440	Prosthetic shrinker, below knee, each	. 25.68
*L8460	Prosthetic shrinker, above knee, each	. 58.12
L8465	Prosthetic shrinker, upper limb, each	. 19.08
L8470	StumpProsthetic sock, single ply, fitting,	
	below knee, each	. 4.48
L8480	StumpProsthetic sock, single ply, fitting,	
	above knee, each	. 5.22
*L8485	StumpProsthetic sock, single ply, fitting,	
	upper limb, each	. 9.97
L8490	Addition to prosthetic sheath/sock, air seal	
	suction retention system	. 73.68
	MISCELLANEOUS SUPPORTS	
X9036	Sacroiliac support elastic	. \$ 49.17
X9038 Rib	belt with shoulder straps	46.83
X9040 Elas	stic anklette	9.85
(5) No	changes	
(6) No	changes	

NOTE: Authority cited: Sections 10725, 14105 and 14124.5, Welfare and Institutions Code.

Reference: Sections 14103.7 and 14105, Welfare and Institutions Code; Statutes of 1984, Chapter 258, Items 4260-106-001 and 890; and Statutes of 1985, Chapter 111, Items 4260-106-001 and 890.

- 3) Readopt Section 51519(b) without modification to read:
- § 51519. Eye Appliances.
- (b) Maximum reimbursement rates for eye appliances shall be as follows:

Procedure Code Section Maximum Allowance Per Lens

(1) No changes
(2) Corneal Lenses
V2500 Contact lens, PMMA, spherical, per lens\$\frac{160.83}{65.94}
V2501 Contact lens, PMMA, toxric or prism
ballast, per lens
Z2900 Contact lens, PMMA- or gas permeable,
replacement, per lens 71.32
V2510 Contact lens, gas permeable, spherical,
per lens
V2511 Contact lens, gas permeable, to <u>p</u> ric or
prism ballast, per lens 160.83 143.27
V2513 Contact lens, <del>hydrophilic, spherical,</del>
gas permeable, extended wear, per lens 225.27 152.59
V2520 Contact lens, hydrophilic, spherical,
per lens
V2521 Contact lens, hydrophilic, toric or
prism ballast, per lens
Z2902 Contact lens, hydrophilic, replacement 97.59 71.32
V2523 Contact lens, hydrophilic, extended wear,
per lens,
Z2908 Contact lens, extended wear, replacement. 97.59
Z2904 Thermal hydrophilic lens care kit 37.59
Z2906 Bandage contact lenses 56.77

(3) No	changes	
(4) No	changes	
(5) No	changes	
(6) Pr	osthetic Eyes	
V2623	Prosthetic eye, plastic, custom	By Report
V2624	Polishing and resurf <u>ac</u> ing of ocular	
	prosthesis	\$ <del>13.34</del> <u>31.96</u>
V2625	Enlargement of ocular prosthesis	By Report
V2626	Reduction of ocular prosthesis	By Report
<u>V2627</u>	Scleral cover shell	By Report
V2628	Fabrication and fitting of ocular	
	conformer	By Report
V2629	Prosthetic eye, other type	By Report
(7) No	changes	

NOTE: Authority cited: Sections 10725, 14105 and 14124.5, Welfare and Institutions Code; and Section 87, Chapter 1594, Statutes of 1982. Reference: Sections 14105 and 14105.3, Welfare and Institutions Code; Statutes of 1984, Chapter 258, Items 4260-106-001 and 890; and Statutes of 1985, Chapter 111, Items 4260-106-001 and 890.

- (4) Readopt Section 51521(i) to supercede previous adoption existing as of August 30, 1999 with modification as follows:
- § 51521. Durable Medical Equipment.
  - (i) Maximum reimbursement rates for durable medical equipment shall

## be as follows:

Item Code		Monthly Rental	Purchase
(1)	No Changes		
(2)	Bathroom Equipment.		
X2916	Commode chair, standard bedside style	\$ 20.26	\$ 75.68
X2918	Commode chair, mobile with bedpan	29.09	188.72
<u>x3220</u>	Wheeled shower/commode chair, all types		
	except rehabilitative or heavy duty.		107.52
E0243	Toilet rail, each	14.24	<u></u> 42.76
E0244	Raised toilet seat		46.04
E0245	Tub stool or bench		55.07
E0246	Transfer tub rail attachment		37.08
E2920	Toilet armrest (attaches to standard		
	commode		28.04
<u>x3168</u>	Transfer bench, molded, all types		74.13
<u>x3170</u>	Transfer bench, padded, all types		107.99
<u>x3174</u>	Hand-held shower device		22.80
<u>x3182</u>	Grab bar - 12"		12.41
<u>x3184</u>	Grab bar - 16"		13.00
<u>x3186</u>	Grab bar - 18"		13.86
<u>x3188</u>	Grab bar - 24"		15.26
<u>x3190</u>	Grab bar - 32"		20.04

			R-42-99E (11/2/99)
E0275	Bed pan, standard, metal or plastic		12.41
E0276	Bed pan, fracture, metal or plastic		10.79
E0325	Urinal; male, jug-type, any material.		8.19
E0326	Urinal; female, jug-type, any material		9.96
(3)	Decubitus Care Equipment		
E0180	Pressure pad, alternating with pump	\$ 19.72	\$ 236.64
E0181	Pressure pad, alternating with pump,		
	heavy duty	21.86	262.32
E0184	Dry pressure mattress	19.92	157.85
E0185	Gel or gel-like pressure pad for		
	mattress, standard mattress length		
	and width	36.43	259.33
E0186	Air pressure mattress	16.46	204.00
E0187	Water pressure mattress	18.82	225.83
E0193	Powered air flotation bed (low air		
	loss therapy)(daily rental)	50.00	
E0194	Air fluidized bed (daily rental)	55.00	
E0196	Gel pressure mattress	26.43	316.10
E0197	Air pressure pad for mattress,		
	standard mattress length and width.	24.79	179.65
E0198	Water pressure pad for mattress,		
	standard mattress length and width.	18.61	179.65
E0199	Dry pressure pad for mattress,		

			R-42-99E (11/2/99)
	standard mattress length and width.	2.59	30.57
E0210	Electric heat pad, standard	2.49	26.46
<del>E0277</del>	Power pressure reducing air mattress		
	(daily rental)	22.68	
E0371	Nonpowered advanced pressure reducing		
	overlay for mattress, standard		
	mattress length and width (daily		
	rental)	10.62	
E0372	Powered air overlay for mattress,		
	standard mattress length and width		
	(daily rental)	16.11	
E0373	Nonpowered advanced pressure reducing		
	mattress(daily rental)	14.76	
X2982	Dynamic mattress replacement system		
_	(daily rental)	37.00	
X2990	Unlisted decubitus pads, cushions,		
	and mattresses	By Report	By Report
(4)	No changes		
(5)	No changes		
(6)	Oxygen and Oxygen Therapy Equipment		
E0441	Oxygen contents, gaseous, per unit		
	(for use with owned gaseous stationar	У	
	systems or when both a stationary and		

			(11/2/99)
	portable gaseous system are owned;		
	1 unit = 50 cubic ft.)	\$ 	\$ 4.33
E0442	Oxygen contents, liquid, per unit (for		
	use with owned liquid stationary		
	systems or when both a stationary		
	and portable liquid system are owned;		
	1 unit = 10 lbs)		9.91
X2956	Oxygen H or K cylinder	3.71	
X2958	Oxygen E cylinder	3.71	92.83
X2960	Small oxygen cylinder stand	3.84	11.44
X2962	Large oxygen cylinder stand	5.13	38.37
X2964	Small oxygen cylinder cart	6.13	46.17
X2966	Large oxygen cylinder cart	14.67	109.84
X2968	Oxygen humidifier	8.72	25.86
E1353	Regulator	18.88	97.98
X2970	Oxygen mask or nasal cannula		4.83
E0500	IPPB machine, all types, with built-in		
	nebulization; manual or automatic		
	valves; internal or external power		
	source	89.00	1,068.04
X3196	Stationary compressed gaseous oxygen		
	system, rental; includes regulator,		
	flowmeter, humidifier, stand,		

	cannula or mask, and tubing	24.20	
E0425	Stationary compressed gas system,		
	purchase; includes regulator,		
	flowmeter, humidifier, nebulizer,		
	cannula or mask, and tubing		116.54
E0430	Portable gaseous oxygen system,		
	purchase; includes regulator,		
	flowmeter, humidifier, cannula		
	or mask, and tubing		214.61
E0431	Portable gaseous oxygen system,		
	rental; includes regulator,		
	flowmeter, humidifier, cannula or		
	mask, and tubing	<del>35.97</del> <u>38.53</u>	
E0434	Portable liquid oxygen system, rental;		
	includes portable container, supply		
	reservoir, humidifier, flowmeter,		
	refill adapter, contents gauge,		
	cannula or mask, and tubing	<del>35.97</del> <u>38.53</u>	
E0435	Portable liquid oxygen system, purchase;		
	includes portable container, supply		
	reservoir, flowmeter, humidifier,		
	contents guage, cannula or mask,		
	tubing and refill adapter	By Repor	<u>t</u> <del>1,074.50</del>

			(11/2/99)
E0450	Volume ventilator, stationary or		
	portable	657.79	6,577.90
E0460	Negative pressure ventilator, portable		
_	or stationary622.50 <u>B</u>	sy Report <mark>7,</mark>	560.00 By Report
E0550	Humidifier, durable for extensive		
	supplemental humidification during		
	IPPB treatments or oxygen delivery.	40.64	406.39
E0570	Nebulizer, with compressor	18.82	191.96
E0600	Suction pump, home model, portable	42.48	445.43
E0601	Continuous airway pressure (CPAP)		
_	<u>device</u> <del>87.3</del> 4	By Report	794.00 By Report
E0608	Apnea monitor	211.61	By Report
X2976	Atmospheric oxygen concentrators, and		
	enrichers, with accessories, including		
	set-up	<u>16</u> <del>228.80</del>	<u></u> <del>1,349.25</del>
X2978	Oxygen conserving device, disposable.		9.00
X2980	Portable volume ventilator Life		
	Care (PVV)	295.00	3,990.00
X3206	ThAIRapy Vest, custom fitted		By Report
X3212	ThAIRapy air-pulse delivery system By	Report	
X3192	Inhalation machine By	Report	By Report
X3214	FLUTTER Device		45.00
(7)	Wheelchairs, Modifications, and Accessorie	:S	

## BASIC WHEELCHAIRS

-	(Factory modifications to basic frame not a	vailable)	
<u>x3002</u>	Standard adult, narrow adult, nonfolding		
-	or folding, with fixed arms, standard		
-	fixed footrests and 8" casters \$	31.28 \$	281.14
<u>x3004</u>	Adult/narrow adult, nonfolding or		
<u>-</u>	folding, with fixed full-length arms,		
_	swinging detachable footrests and 8"		
_	casters	45.48	413.48
	MANUAL WHEELCHAIRS		
-	(Reimbursement rate includes payment for	<del>detachable</del>	
	armrests and elevating legrests and/or	footrests)	
<del>X3240</del>	Standard weight	\$52.10	<del>\$ 521.00</del>
<del>X3242</del>	Standard weight, hemi (low seat)	69.31	693.10
<del>X3244</del>	Lightweight	75.01	750.10
<del>X3246</del>	High-strength, lightweight	108.35	1,083.50
<del>X3248</del>	Heavy duty	101.68	1,016.80
<del>X3250</del>	Extra heavy duty	161.68	1,616.80
<del>X3252</del>	Other manual wheelchair base	170.89	1,708.91
E1031	Rollabout chair	48.05	480.50
E1091	Youth wheelchair, any type	67.59	811.10
E1250	Lightweight wheelchair, fixed full		
_	length arms, swing away detachable		

	footrest	57.03	628.52			
	BASIC MANUAL WHEELCHAIR ACCESSORIES					
Access	ories that may be added to $\underline{X3002}$ , $\underline{X3004}$ ,	3240, X3242,	X3244, X3246,			
<del>x3248,</del>	X3250, X3252, E1031 and E1091 and E1250	Basic Manual	Wheelchairs)			
X3006	Arms, detachable, desk or full-length,					
	pair	\$ 18.38	\$ 167.11			
x3008	Arms, adjustable height, detachable,					
	desk or full-length, pair	25.28	229.78			
E0990	Elevating leg rest, each	10.72	88.71			
E1065	Power attachment (to convert any					
	wheelchair to motorized wheelchair,					
	E.G., Solo)	238.02	2,193.99			
X3010	Back, semi-reclining	20.38	185.32			
X3012	Back, full-reclining	27.70	251.73			
	MOTORIZED/POWER WHEELC	HAIRS				
_	(Reimbursement rate includes payment fo	<del>r detachable</del>				
	armrests and elevating legrests and/o	r footrests)				
<del>X3254</del>	Standard weight frame	\$ 403.33	4,033.30			
<del>X3256</del>	Standard weight frame, with programmable	-				
	control parameters	481.30	4,813.00			
<del>X3258</del>	Lightweight, portable	295.22	2,952.20			
<del>X3260</del>	Other motorized, power wheelchair	670.31	6,703.09			
E1230	Power operated vehicle, (three or four					

wheel nonhighway)	182.84	1,833.96
CUSTOM FITTED WHEELCHAIRS		
(These wheelchairs are available with numero	ous factory	
modifications to the basic wheelchair frame,	i.e., specia	al
seat depth, special seat height, special arm	height, etc.	.)
X3016 Custom modified standard weight		
wheelchair		734.31
X3018 Custom modified lightweight wheelchair		876.24
CUSTOM FITTED WHEELCHAIR MODIFICATIONS A	AND ACCESSOR	IES
(Factory modifications that may be added during co	nstruction t	to X3016 and
X3018 Custom Fitted Wheelchairs. Items designated	l by an aster	risk (*) may
be added to the $\underline{X3002}$ , $\underline{X3004}$ , $\underline{X3240}$ , $\underline{X3242}$ , $\underline{X3244}$ ,	x3246. x3248	<del>3, X3250,</del>
X3252, E1031 and E1091 and E1250 Basic Manual Whee	elchairs)	
Arm of Chair		
X3020 Offset, non-detachable, desk or		
full-length, pair\$	\$	206.21
X3022 Detachable, desk or full-length, pair		109.67
X3024 Adjustable height, detachable, desk		
or full-length, pair		235.66
X3026 Wrap around arms, detachable, desk		
or full-length, pair		190.67
X3028 Wrap around arms, adjustable height,		
detachable, desk or full-length, pair		248.52

			R-42-99E (11/2/99)
E1227	Special arms height	19.13	191.24
X3032	Armrest pads, narrow, pair		50.89
X3034	Special skirtguard height, pair		36.42
	Back of Chair		
E1225	Semi-reclining	\$ 31.14	\$ 373.73
E1226	Full-reclining	38.70	376.02
X3040	Sectional height back, for active-		
	duty lightweight custom fitted		
	wheelchairs		114.62
X3042	Sectional height back, for all other		
	custom fitted wheelchairs		152.65
E1228	Special back height	19.44	233.27
X3046	Flared back		133.37
*X3048	Back upholstery, zippered	7.89	71.77
*X3050	Back upholstery, detachable, with		
	swivel-type fasteners		93.74
*X3052	Back upholstery, reinforced	2.59	23.57
*X3054	Back upholstery, slackback		22.50
*X3056	Naugahyde cap, at top of back		
	upholstery	2.36	21.42
*X3058	Rivnuts, for back upholstery, set	2.83	25.71
*X3060	Crutch/cane holder, each	2.36	21.42
*E0971	Anti-tipping device	5.19	52.02

			R-42-99E (11/2/99)
*X3062	Solid back insert, with foam		
	padding, each	6.24	56.77
*X3064	Wedge taper, built into solid		
	back insert, each	5.90	53.56
*X3066	ArmslingRancho, adjustable height		
	and angle, each	10.84	98.55
*X3068	Armslingstandard, nonadjustable		
	each	7.30	66.41
*E0978	Belt, safety with airplane buckle	3.30	30.84
*E0979	Belt, safety with velcro closure	2.38	23.77
	Seat of Chair		
E1296	Special wheelchair seat height from		
	floor	\$ 37.50	\$ 374.93
E1297	Special wheelchair seat depth, by		
	upholstery	9.42	72.09
E1298	Special wheelchair seat depth and/or		
	width, by construction	32.56	325.53
X3070	Special seat width, narrowed by		
	upholstery		34.28
X3072	Seat widths, 19" and 20" construction		
	altered accordingly		194.96
X3074	Raise seat height, 2" limit, by		
	crossbraces only, arms and back		

			R-42-99E (11/2/99)
	height not raised		36.42
*X3076	Seat assembly, solid folding	6.48	58.92
*X3078	Wheelchair cushions	By Report	By Report
*E0975	Reinforced seat upholstery	3.58	35.89
*E0977	Wedge cushion	4.34	45.08
*E0992	Solid seat insert	7.50	77.14
	Footrests and Legrests		
X3080	Legrests, swinging, detachable,		
	elevating, pair	\$	\$ 128.54
X3082	Footrest/legrest extension, minimum,		
	pair		101.76
X3084	Footrest/legrest extension, maximum,		
	pair		88.38
X3086	Footplates, fixed angle, parallel to		
	floor or seat, pair		81.41
*X3088	Footplate angle adjustment attachment,		
	pair	9.90	89.98
*X3090	Growing hangers, pair	8.25	74.98
*E0970	No. 2 Footplates, except for		
	elevating legrest	4.10	39.63
*X3092	Footplates, plastic coated, pair	2.94	26.78
*X3094	Footboard, one piece, mounted on		
	swinging detachable footrests	7.89	71.77

			2-99E (2/99)
*X3096	Footboard, one piece, extended to		
	rear, reversed inward	11.38	103.38
*X3098	Footboard, one piece, belt-on	6.36	57.84
*X3100	Legrest panel, all types, each	4.13	37.49
*X3102	H-straps, all types, each	3.65	33.21
*X3104	Leg strap, single, all types	2.09	19.01
*X3106	Toe loops, with buckle or velcro,		
	pair	2.36	21.42
*X3108	Heel loops, with ankle straps, pair	3.54	32.14
*X3110	Roller bumpers, pair	1.77	16.07
	Wheels and Casters		
*X3112	Casters, pneumatic, 8", pair	\$ 5.06	\$ 46.06
*X3114	Casters, semi-pneumatic, 8" by 2",		
	pair	2.36	21.42
*X3116	Casters, 5", with adapter, in lieu		
	of 8", pair	10.08	91.59
*X3118	Caster pin locks, pair	5.77	52.49
*X3120	Real wheelchair tires, treaded		
	pneumatic, pair		12.85
*X3122	Handrims, plastic coated, pair	2.59	23.57
*X3124	Handrims with 8 oblique projections,		
	pair	10.48	95.34
*E0967	Handrims with 8 vertical rubber		

			R-42-99E (11/2/99)
	tipped projections, pair	10.99	107.13
*X3126	Handrims, with 12 vertical or oblique		
	projections, pair	11.78	107.12
*X3128	Handrims, with 16 vertical or oblique		
	projections, pair	14.14	128.54
*X3130	Tire tubes, thorn resistant, pair	1.65	15.00
*X3132	Rear wheels, with extra heavy duty		
	.120 Gauge spokes	4.77	43.39
*X3134	Rear wheels, with pneumatic tires,		
	treaded or nontreaded, pair	5.77	52.49
*X3136	Handrim spacers, extra wide, set	1.41	12.85
*E0958	Attachment to convert any wheelchair		
	to one arm drive	35.94	392.19
E0959	Amputee adapter	7.20	71.69
*E0961	Brake extension	2.52	24.11
*E0974	"Grade-aid" (device to prevent rolling		
	back on an incline) for wheelchair	7.93	75.36
	Power Drive Units and Accessories		
X3138	Solid State proportional control,		
	transistorized, 12/24-volt system,		
	battery charger, with v-belt drive	\$	\$ 3,064.70
X3140	Solid state proportional control,		
	transistorized, 12/24-volt system,		

## (11/2/99)battery charger, with friction or gear drive..... -----2,163.82 X3142 Proportional control, transistorized, 12/24-volt system, battery charger, any type drive..... ----1,468.62 X3144 Micro-switch selective control, battery charger, any type drive..... ----1,468.62 \*X3146 Chin/mouth control assembly, with accessible on/off switch, each.... 36.88 335.29 \*X3148 Joystick mount, swing-away, each..... 7.07 64.27 X3150 Battery, wet lead acid, deep cycle, 12-volt, group size 22NF, each..... 79.35 X3152 Battery, wet lead acid, deep cycle, 12-volt, group size U-1, each..... 66.90 X3154 Battery, wet lead acid, deep cycle, 12-volt, group size 24, each..... ----86.27 X3156 Battery, lead acid, heavy-duty, 6-volt, group size 1, each..... 73.81 X3158 Battery, lead acid, heavy-duty, 6-volt, group size 2N, each..... 81.05 ----X3230 Battery, sealed lead acid, (gel or AGM), deep cycle, 12-volt, group size U-1, each..... 74.88

X3232	Battery, sealed lead acid, (gel or	
	AGM), deep cycle,12-volt, group	
	size 22NF, each	108.01
X3234	Battery, sealed lead acid, (gel or	
	AGM), deep cycle, 12-volt,	
	group size 24, each	136.01
UN	LISTED WHEELCHAIRS, MODIFICATIONS AND ACCESSORIES	
X3160	Unlisted wheelchairs By Report	Ву
Report		
X3162	Unlisted wheelchair modifications	
	and accessories By Report	Ву
Report		
(8)	No Changes	

NOTE: Authority cited: Sections 10725, 14105 and 14124.5, Welfare and Institutions Code. Reference: Sections 14103.7 and 14105, Welfare and Institutions Code; Statutes of 1984, Chapter 258, Items 4260-106-001 and 890; and Statutes of 1985, Chapter 111, Items 4260-106-001 and 890.

## PROGRAM CONTACTS

(9) No Changes

- For technical questions on the R-42-99E regulations, please contact: Jinglish@dhs.ca.gov, phone number: 916-657-3100.
- To receive a hard copy of the regulation package, contact regulation@dhs.ca.gov.
- Written testimony and comments on this regulation package may be submitted to regulation@dhs.ca.gov and must be received no later than 5:00 pm on February 23, 2000. Please ensure that the regulation control number R-42-99E is shown on all correspondence.